

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

03-05-2003 90027 001 ****61.25

DOCUMENT # N04288

1. Entity Name

WOODLAND CREEK HOME OWNERS' ASSOCIATION, INC.



Principal Place of Business

**7560 WOODLAND CREEK LANE
LAKE WORTH FL 33467**

Mailing Address

**7560 WOODLAND CREEK LANE
LAKE WORTH FL 33467**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2445924**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NORRIS, DAVID B
712 US HWY ONE
NO PALM BCH FL 33408**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **LAHMAN, ROBERT**
STREET ADDRESS **7497 HAZELWOOD CIRCLE**
CITY-ST-ZIP **LAKE WORTH FL 33467** **D**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☒ Delete
NAME **RICHARDS, HARRY J**
STREET ADDRESS **7474 HAZELWOOD CIRCLE**
CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE **VP WILLIAM HAMILTON** ☐ Change ☒ Addition
NAME **9511 HAZELWOOD CIRCLE**
STREET ADDRESS **LAKE WORTH, FL 33467** **D**

TITLE **TD** ☐ Delete
NAME **YOUNG, JOHN G**
STREET ADDRESS **7482 HAZELWOOD CIRCLE**
CITY-ST-ZIP **LAKE WORTH FL 33467** **D**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☒ Delete
NAME **AGEE, LEIGH A**
STREET ADDRESS **6095 BIRCHTREE TERRACE**
CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE **SEC WILLIAM KANE** ☐ Change ☒ Addition
NAME **7383 HAZELWOOD CIRCLE**
STREET ADDRESS **LAKE WORTH, FL 33467** **D**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

JOHN G. YOUNG, Treasurer **2/28/03**

561-432-9122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)