

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT # N07471 (8)**  
1. Corporation Name  
**WOOD DALE HOMEOWNERS CORPORATION**



Principal Place of Business: % ELIZABETH FRANKLIN, 37807 BENTLEY DR., ZEPHYRHILLS FL 33541  
Mailing Address: % ELIZABETH FRANKLIN, 37807 BENTLEY DR., ZEPHYRHILLS FL 33541

3. Date Incorporated or Qualified: 02/05/1985  
3a. Date of Last Report: 04/03/1995

2. Principal Place of Business (21-23) and 2a. Mailing Address (26-28) fields for Suite, Apt. #, etc. and City & State, Zip, and Country.

4. FEI Number: 59-2988465  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing: \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes  No

9. Name and Address of Current Registered Agent: FRANKLIN, ELIZABETH, 37807 BENTLY DR., ZEPHYRHILLS FL 33541  
10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code.

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: P	MOTE, OWEN C. 37832 BENTLY DR. ZEPHYRHILLS FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D	PRESHER, NINA 37901 BEATLEY DR ZEPHYRHILLS FL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: ST	WHTHE, JEAN 37825 BOSTON AVE. ZEPHYRHILLS FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D	FRANKLIN, ELIZABETH 37807 BENTLY DR. ZEPHYRHILLS FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D	STAFFORD, ARTHUR 37745 BENTLEY DR. ZEPHYRHILLS FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: V	OSTERHOUDT, HOMER 37815 BEHTLEY DR. ZEPHYRHILLS FL	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		5.2 NAME	STAFFORD, ARTHUR
		5.3 STREET ADDRESS	37745 BENTLEY DR.
		5.4 CITY - ST - ZIP	ZEPHYRHILLS, FL 33541
		6.2 NAME	D
		6.3 STREET ADDRESS	DAWSON, LOIS
		6.4 CITY - ST - ZIP	6633 NEW ENGLAND DR. ZEPHYRHILLS, FL 33541

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Owen C. Mote 3/20/96 813-782-9132  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)