

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

FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90105 024 ****61.25



DOCUMENT # N07471
1. Entity Name
WOOD DALE HOMEOWNERS CORPORATION

Principal Place of Business Mailing Address
C/O BETTY WOOD C/O BETTY WOOD
37802 BOSTON AVENUE 37802 BOSTON AVENUE
ZEPHYRHILLS FL 33541 ZEPHYRHILLS FL 33541
US US



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business 3. Mailing Address
CO JEANE WYTHE **CO JEANE WYTHE**
Suite, Apt. #, etc. Suite, Apt. #, etc.
37939 CAPE COD DR. **37939 CAPE COD DR.**
City & State City & State
ZEPHYRHILLS, FL **ZEPHYRHILLS, FL**
Zip Country Zip Country
33542 U.S.A. **33542 U.S.A.**

4. FEI Number **59-2988465** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
WOOD, BETTY
37802 BOSTON AVENUE
ZEPHYRHILLS FL 33541

7. Name and Address of New Registered Agent
Name **JEANE WYTHE**
Street Address (P.O. Box Number is Not Acceptable)
37839 CAPE COD DR.
ZEPHYRHILLS
City **FL** Zip Code **33542**

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 Jeane Wythe Jeane Wythe DATE 2-5-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ARNETT, AUGUST	
STREET ADDRESS	37827 BEXTLEY AVE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	
TITLE	D	<input type="checkbox"/> Delete
NAME	WYTHE, JEANE	
STREET ADDRESS	37939 CAPE COD DRIVE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33542	
TITLE	ST	<input type="checkbox"/> Delete
NAME	CORNISH, ROSE	
STREET ADDRESS	37821 BOSTON AVENUE	
CITY-ST-ZIP	ZEPHYRHILLS FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WARE, GLORIA	
STREET ADDRESS	37940 BENTLEY DR	
CITY-ST-ZIP	ZEPHYRHILLS FL	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	DAWSON, LOIS	
STREET ADDRESS	6633 NEW ENGLAND DR	
CITY-ST-ZIP	ZEPHYRHILLS FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	P BOB HOFFMAN	
STREET ADDRESS	37935 CAPE COD DRIVE	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33542	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LARRY BUZZIE	
STREET ADDRESS	37800 BOSTON AVE	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33542	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LOUIS GILLETTE	
STREET ADDRESS	37811 BENTLEY DRIVE	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33542	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARIE REYNOLDS	
STREET ADDRESS	37904 CAPE COD	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33542	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LARRY FRIESS	
STREET ADDRESS	37835 BENTLEY DRIVE	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33542	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JEANE WYTHE	
STREET ADDRESS	37939 CAPE COD DRIVE	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33542	

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: ROSE CORNISH Rose Cornish Date 2/03/03 Phone # 813-780-1865

CR2E037 (10/02)