

FILE NOW: FILING FEE IS \$61.25

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Mar 18 1998 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N35975 (4)**  
 1. Corporation Name  
**THE MANORS AT WEDGEWOOD LAKE HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business <b>6230 BISCAYNE BLVD. GREENACRES FL 33463</b>	Mailing Address <b>C/O CMC MANAGEMENT 2994 JOG RD., SUITE B GREENACRES FL 33467 US</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified <b>12/27/1989</b>	4. FEI Number <b>65-0183464</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent  
**JEFFERS, WILLIAM**  
**3522 MILLBROOK CIRCLE**  
**GREENACRES FL 33463**

10. Name and Address of New Registered Agent
81 Name <b>same as before</b>
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City <b>FL</b> 85 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 *William W. Jeffers* DATE **2/13/98**  
 Signature, typed or printed name of registered agent and 1998 fee if not applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD SOLDANO, ANTHONY 3527 MILLBROOK WAY CIRCLE GREENACRES FL <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD HIRSCHFIELD, PHILIP 3529 MILLBROOK WAY CIRCLE GREENACRES FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S KUPPER, OTTO 6116 ELM WAY CT GREENACRES FL <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD BRETTSCHEIDER, MIKE 3521 MILLBROOK CIRCLE GREENACRES FL <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD JEFFERS, WILLIAM 3522 MILLBROOK WAY CIRCLE GREENACRES FL <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

2nd VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Glenn Emert 3510 Ridge Tree Ct. Greenacres, FL 33463
1st VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Philip Hirschfield 3529 Millbrook Way Cir. Greenacres, FL 33463
Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Mike Brettschneider 3521 Millbrook Way Cir. Greenacres, FL 33463
President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition William Jeffers 3522 Millbrook Way Cir. Greenacres, FL 33463

14. 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 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: *William W. Jeffers* DATE **2/13/98**

CR2037 (10/97)