


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 10, 2005 8:00 am**  
**Secretary of State**

03-10-2005 90158 036 \*\*\*\*61.25

**DOCUMENT # N96000004592**

1. Entity Name  
**WYNDHAM LAKES NORTH HOMEOWNERS' ASSOCIATION, INC.**



Principal Place of Business  
 INTEGRITY PROPERTY MGMT  
 953 UNIVERSITY DRIVE  
 CORAL SPRINGS, FL 33071 US

Mailing Address  
 INTEGRITY PROPERTY MGMT  
 953 UNIVERSITY DRIVE  
 CORAL SPRINGS, FL 33071 US

**50024414**



01062005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number  
**65-0705026**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**INTEGRITY PROPERTY MANAGEMENT**  
**953 UNIVERSITY DRIVE**  
**CORAL SPRINGS, FL 33071**

7. Name and Address of New Registered Agent

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

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 **PD**  Delete  
 NAME **WEISSBAUM, JEAN**  
 STREET ADDRESS **12464 N W 55 ST**  
 CITY-ST-ZIP **CORAL SPRINGS, FL 33076**

TITLE **SD**  Delete  
 NAME **VARGA, EDITH**  
 STREET ADDRESS **5562 N W 124TH AVE**  
 CITY-ST-ZIP **CORAL SPRINGS, FL 33076**

TITLE **TD**  Delete  
 NAME **KLEINER, TINA**  
 STREET ADDRESS **12339 N W 55 ST**  
 CITY-ST-ZIP **CORAL SPRINGS, FL 33076**

TITLE **VO**  Delete  
 NAME **BARBUTO, JOHN**  
 STREET ADDRESS **5552 NW 125TH TERRACE**  
 CITY-ST-ZIP **CORAL SPRINGS, FL 33076**

TITLE **D**  Delete  
 NAME **NORBERTO, ANGELO**  
 STREET ADDRESS **12306 N W 55 ST**  
 CITY-ST-ZIP **CORAL SPRINGS, FL 33076**

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME **Peter Bungo**  
 STREET ADDRESS **12400 NW 55 ST**  
 CITY-ST-ZIP **CORAL SPRINGS, FL 33076**

TITLE  Change  Addition  
 NAME **Linda Norberto**  
 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:** *J. Weissbaum*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_