

FILE NOW: FILING FEE IS \$61.25

FILED  
Jun 04 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000005630 (6)  
1. Corporation Name  
WOODSONG HOMEOWNERS ASSOCIATION OF PINELLAS COUNTY, INC.



Principal Place of Business 3160 MCMULLEN BOOTH ROAD CLEARWATER FL 34624	Mailing Address 3160 MCMULLEN BOOTH ROAD CLEARWATER FL 34624
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3. Date Incorporated or Qualified  
11/04/1996 59-3509009

4. FEI Number  
APPLIED FOR - NA

Applied For  
Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 33761 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 33761 Country
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5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?  
 Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
MCCULLOUGH, JAMES B  
3160 MCMULLEN BOOTH ROAD  
CLEARWATER FL 34624

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code FL 33761

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

TITLE	PSTD	<input type="checkbox"/> DELETE
NAME	MCCULLOUGH, JAMES B	
STREET ADDRESS	3160 MCMULLEN BOOTH ROAD	
CITY-ST-ZIP	CLEARWATER FL 34624 33761	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MCCULLOUGH, MARLENE K	
STREET ADDRESS	3160 MCMULLEN BOOTH ROAD	
CITY-ST-ZIP	CLEARWATER FL 34624 33761	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SADORF, RICK W	
STREET ADDRESS	3432 VERONICA COURT	
CITY-ST-ZIP	CLEARWATER FL 34624 33761	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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: *James B. McCullough* 6/30/98 813-791-3111

CR2E037 (10/97)