

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000005630

1. Entity Name

WOODSONG HOMEOWNERS ASSOCIATION OF PINELLAS COUN

**FILED**  
**Mar 10, 2000 8:00 am**  
**Secretary of State**

03-10-2000 90017 003 \*\*\*\*61.25

Principal Place of Business

Mailing Address

~~3048 WOODSONG LANE  
 CLEARWATER FL 33761  
 US~~

~~3048 WOODSONG LANE  
 CLEARWATER FL 33761 2024  
 US~~

2. Principal Place of Business

3. Mailing Address

3001 Woodsong Lane

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clearwater, FL

City & State

4. FEI Number

59-3509009

Applied For

Not Applicable

Zip

33761

Country

Pinellas

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GROSSMAN, JEFFREY H  
 3048 WOODSONG LANE  
 CLEARWATER FL 33761

Name William Douglas

Street Address (P.O. Box Number is Not Acceptable)

3001 WOODSONG LANE

Clearwater

City

Clearwater

FL

Zip Code

33761

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.

SIGNATURE William Douglas William Douglas W.P.D.

3-6-00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
 FEE IS \$61.25

9. Election Campaign Financing  
 Trust Fund Contribution.

\$5.00 May Be  
 Added to Fees

Make Check Payable to  
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                |                                |  |
|----------------|--------------------------------|--|
| TITLE          | PD                             | <input checked="" type="checkbox"/> Delete |
| NAME           | SHELLING, JOHN                 |  |
| STREET ADDRESS | 3036 WOODSONG LANE             |  |
| CITY-ST-ZIP    | CLEARWATER FL 33761            |  |
| TITLE          | <del>PD</del>                  | <input checked="" type="checkbox"/> Delete |
| NAME           | <del>GROSSMAN, JEFFREY</del>   |  |
| STREET ADDRESS | <del>3048 WOODSONG LANE</del>  |  |
| CITY-ST-ZIP    | <del>CLEARWATER FL 33761</del> |  |
| TITLE          | D                              | <input checked="" type="checkbox"/> Delete |
| NAME           | POWERS, TERRANCE               |  |
| STREET ADDRESS | 3030 WOODSONG LANE             |  |
| CITY-ST-ZIP    | CLEARWATER FL 33761            |  |
| TITLE          | D                              | <input checked="" type="checkbox"/> Delete |
| NAME           | AUSTIN, WARREN                 |  |
| STREET ADDRESS | 2563 TWIN PINE WAY             |  |
| CITY-ST-ZIP    | CLEARWATER FL 33761            |  |
| TITLE          |                                | <input type="checkbox"/> Delete            |
| NAME           |                                |  |
| STREET ADDRESS |                                |  |
| CITY-ST-ZIP    |                                |  |
| TITLE          |                                | <input type="checkbox"/> Delete            |
| NAME           |                                |  |
| STREET ADDRESS |                                |  |
| CITY-ST-ZIP    |                                |  |

|                |                           |  |
|----------------|---------------------------|--|
| TITLE          | President ID              | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | BARBARA WARUCKE           |  |
| STREET ADDRESS | 3012 WOODSONG LANE        |  |
| CITY-ST-ZIP    | CLEARWATER, FL 33761      |  |
| TITLE          | V. PRES/D                 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | William Douglas           |  |
| STREET ADDRESS | 3001 WOODSONG LANE        |  |
| CITY-ST-ZIP    | CLEARWATER, FL 33761      |  |
| TITLE          | SAM COWART - TREASURER ID | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | SAM COWART                |  |
| STREET ADDRESS | 3007 WOODSONG LANE        |  |
| CITY-ST-ZIP    | CLEARWATER, FL 33761      |  |
| TITLE          |                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                           |  |
| STREET ADDRESS |                           |  |
| CITY-ST-ZIP    |                           |  |
| TITLE          |                           | <input type="checkbox"/> Change <input type="checkbox"/> 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: Samuel Cowart (Samuel A. Cowart T/D) 3-2-00 813-935-7677

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)