

2002 01/02
2004 UNIFORM BUSINESS REPORT (UBR) 01/02

05-23-2002 90011032****61.25
 N99000003404
 02 JUN 19 PM 3:06
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # N99000003404

1. Entity Name

WOODHAVEN ESTATES VILLAS PROPERTY OWNERS ASSOCIA

Principal Place of Business

Mailing Address

14601 TAMiami TRAIL
 N. PORT FL 34287

14601 TAMiami TRAIL
 N. PORT FL 34287

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

05-03-01 90972 013 \$61.25

4. FEI Number **APPLIED FOR** Applied For
 65-0947259 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ELMY, ROBERT A
14601 TAMiami TRAIL
N. PORT FL 34287

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.

SIGNATURE

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
After September 12, 2001, min. will be \$236.25

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 NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D ELMY, ROBERT A 14601 TAMiami TRAIL N. PORT FL 34287	<input type="checkbox"/>		<input type="checkbox"/>
D ELMY, TERRI 14601 TAMiami TRAIL N. PORT FL 34287	<input type="checkbox"/>		<input type="checkbox"/>
D ALLEN, CHARLES 14601 TAMiami TRAIL N. PORT FL 34287	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

RB/19

CR2E037 (5/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 officers empowered.

SIGNATURE:

Signature
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-02
 Date

941-426-6682
 Daytime Phone #

Attachment
Allstate Builders of SW FL, Inc.

14601 Tamiami Trail North Port, FL 34287

941.426.6652 Corp. Office • fax 941.426.6398 email GTE/allbuild@gte.net
Lic. # C.G.C. 036126

119900000 3404
797619

April 30, 2002

Department of State
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Woodhaven Estates Villas Property Owners Association

Dear Sir

I am enclosing a copy of 2001 Tax Return with a third Director added. Last years original return had one Director struck out. I never received any notice that the return was not accepted as filed. The check that paid the Fee cleared the bank and I assumed that every thing was accepted as filed. I ask I ask that any penalties be waived and the Corporation be reinstated. I am enclosing the 2002 return as well as the check for this year.

If I can be of any further assistance, do not hesitate to contact me.

Sincerely,



Jack Slonager
C.F.O.