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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N38374** **(7)**

1. Corporation Name

WOOD TRAIL VILLAGE CIVIC ASSOCIATON, INC.

Principal Place of Business	Mailing Address
4423 WOOD TRAIL BLVD NEW PORT RICHEY FL 34653	4423 WOOD TRAIL BLVD NEW PORT RICHEY FL 34653

3. Date Incorporated or Qualified: 05/30/1990

4. FEI Number: 59-3051870 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26): P.O. Box 1928
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28): Elfers, Fla. 34680
Zip (24) / Country (25)	Zip (29): 34680 / Country (30): Pasco

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 N/A

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
NORTH, JOSEPH 4423 WOOD TRAIL BLVD NEW PORT RICHEY FL 34653	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 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: Joseph North Treasurer — DATE: Feb 13, 1998
Signature required or printed name of registered agent and title if 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	D LINARES, ROBERT 4136 WOOD TRAIL BLVD NEW PORT RICHEY FL 34653	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D Srsich, Charles 8866 Napa Loop New Port Richey, Fla. 34653	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHRISTIANSEN, BERT 4228 WOOD TRAIL BLVD NEW PORT RICHEY FL 34653	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D Reece, Herb 4430 Wood Trail Blvd. New Port Richey, Fla. 34653	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D O'BARR, THOMAS 4430 WOOD TRAIL BLVD. NEW PORT RICHEY FL 34653	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SRSICH, CHARLES 8866 NAPA LOOP NEW PORT RICHEY FL 34653	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	V Foskit, Susan 4353 Tall Oak Lane New Port Richey, Fl. 34653	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T NORTH, JOSEPH 4423 WOOD TRAIL BLVD NEW PORT RICHEY FL 34653	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P REECE, HERB 4430 WOOD TRAIL BLVD NEW PORT RICHEY FL 34653	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	P. Kenney, Catherine 4352 Royal Oak Lane New Port Richey, Fl. 34653	☒ Change ☐ Addition

CR2E037 (10/97)

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: Joseph North Joseph North, Treasurer 2/13/98 813-372-7878