

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90257 006 ****61.25

DOCUMENT # N00000005213

1. Entity Name
**COLONIAL WOODS OF ORLANDO HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
~~PO BOX 540616~~
ORLANDO, FL 32854-0616

Mailing Address
~~PO BOX 540616~~
ORLANDO, FL 32854-0616

94075895



2. Principal Place of Business
52 E. South Street
Suite, Apt. #, etc.

3. Mailing Address
52 E. South Street
Suite, Apt. #, etc.

03262004 Chg-NP CR2E037 (10/03)

City & State
Orlando, FL
Zip **32801** Country **USA**

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Orlando, FL
Zip **32801** Country **USA**

4. FEI Number
59-3666907
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DON ASHER & ASSOCIATES, INC.
52 EAST SOUTH STREET
ORLANDO, FL 32801

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BUNKER, CHERYL
2130 COLONIAL WOODS BLVD.
ORLANDO, FL 32826 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
WERNECKE, DAN
14220 COLONIAL LAKES DR.
ORLANDO, FL 32826 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
FISHER, NICOLE
2127 COLONIAL WOODS BLVD.
ORLANDO, FL 32826 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D VP
Robert Russo
14216 Colonial Lake Dr.
Orlando, FL 32826 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Cheer Burke President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/04
Date

407-425-4561
Daytime Phone #