

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755049

FILED  
Jan 05, 2008  
Secretary of State

Entity Name: WICKLOW HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

NANCY CIRCLE  
WINTER SPRINGS, FL 32719 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 195665  
WINTER SPRINGS, FL 32719 US

**New Mailing Address:**

FEI Number: 59-2378034

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JACKFERT, RICH PRES.  
906 KIM COURT  
WINTER SPRINGS, FL 32708 US

**Name and Address of New Registered Agent:**

PATEL, SAURABH TRES.  
905 KIM COURT  
WINTER SPRINGS, FL 32708 US

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: SAURABH K PATEL

01/05/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D/S ( ) Delete  
Name: JAMES, ROD  
Address: 907 KIM COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D/P ( ) Delete  
Name: JACKFERT, RICH  
Address: 906 KIM COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D/T ( ) Delete  
Name: LENZINI, TOMMY  
Address: 1026 NANCY CIR  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D/T (X) Delete  
Name: PATEL, SAURABH  
Address: 905 KIM COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D/VP (X) Change ( ) Addition  
Name: HOLSENBECK, DAN  
Address: 1424 MOUNT LAUREL DRIVE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D/T (X) Change ( ) Addition  
Name: PATEL, SAURABH  
Address: 905 KIM COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAURABH K PATEL

TRES

01/05/2008

Electronic Signature of Signing Officer or Director

Date