2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2008 8:00 am
Secretary of State

03-12-2008 90032 041 ****61.25

DOCUMENT # N35975

1. Entity Name
THE MANORS AT WEDGEWOOD LAKE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2950 JOG RD GREENACRES, FL 33467	2950 JOG RD GREENACRES, FL 33467

400431

02222008 No Chg-NP CR2E037 (4/06)

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4. FEI Number 65-0183464 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

DICKER, EDWARD ESQ.
1818 AUSTRALIAN AVE S STE 400
W PALM BCH, FL 33409

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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, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PEREZ, SILVIO
STREET ADDRESS	3508 WESTMINISTE WAY
CITY-ST-ZIP	GREENACRES, FL 33463
TITLE	SD
NAME	HOLSAPPLE, IVAN
STREET ADDRESS	6113 POND TREE COURT
CITY-ST-ZIP	GREENACRES, FL 33463
TITLE	IVD
NAME	EMERT, GLENN
STREET ADDRESS	3510 MILLBROOK WAY CIR
CITY-ST-ZIP	GREENACRES, FL 33463
TITLE	2VD
NAME	FORSBURG, NANCY
STREET ADDRESS	3511 MILLBROOK WAY CIRCLE
CITY-ST-ZIP	GREENACRES, FL 33463
TITLE	TD
NAME	GOLDBERG, FRANCINE
STREET ADDRESS	3503 MILLBROOK WAY CIR
CITY-ST-ZIP	LAKE WORTH, FL 33463
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Silvio Perez 03/03/08 (561) 641-1016
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #