

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 18, 2008**  
**Secretary of State**

DOCUMENT# N98000000544

**Entity Name:** THE RESERVE AT WEDGEFIELD HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**206 ELM AVE.  
SANFORD, FL 32771**New Principal Place of Business:****Current Mailing Address:**206 ELM AVE.  
SANFORD, FL 32771**New Mailing Address:**P.O. BOX 1569  
SANFORD, FL 32772**FEI Number:** 59-3532601**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ALL ABOUT MANAGEMENT  
206 ELM AVENUE  
SANFORD, FL 32771 US**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: AJERO, ELVIRA  
Address: 19719 GLEN ELM WAY  
City-St-Zip: ORLANDO, FL 32833

Title: VP ( ) Delete  
Name: STEPHENS, EVERTT  
Address: 19220 TIMBER PINE LANE  
City-St-Zip: ORLANDO, FL 32833

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PRES (X) Change ( ) Addition  
Name: BURKE, CHRISTOPHER  
Address: 2715 VILLAGE PINE TERRACE  
City-St-Zip: ORLANDO, FL 32833

Title: VP (X) Change ( ) Addition  
Name: WRIGHT, STEVEN  
Address: 19408 BRIERCREST TRAIL  
City-St-Zip: ORLANDO, FL 32833

Title: TREA ( ) Change (X) Addition  
Name: THOMAS, JOHN  
Address: 2751 VILLAGE PINE TERRACE  
City-St-Zip: ORLANDO, FL 32833

Title: SECR ( ) Change (X) Addition  
Name: ALVAREZ, ANA  
Address: 19245 BRIERCREST TRAIL  
City-St-Zip: ORLANDO, FL 32833

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: ANGELIA L. GORDON

RA

12/18/2008

Electronic Signature of Signing Officer or Director

Date