

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755909

FILED
Mar 23, 2012
Secretary of State

Entity Name: THE VILLAGE AT WILDFLOWER COUNTRY CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6796 GASPARILLA PINES BLVD.
ENGLEWOOD, FL 34224

New Principal Place of Business:

Current Mailing Address:

C/O ANTARES GROUP
4195 S. TAMIAMI TRL, PMB #173
VENICE, FL 34293

New Mailing Address:

FEI Number: 59-2263399 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ANTARES GROUP, INC
4195 S. TAMIAMI TRL
PMB #173
VENICE, FL 34293 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: TD
Name: DOBES, JESSIE
Address: 4195 S. TAMIAMI TRL PMB #173
City-St-Zip: VENICE, FL 34293

Title: PD
Name: TURLEY, GEORGE
Address: 4195 S. TAMIAMI TRL PMB #173
City-St-Zip: VENICE, FL 34293

Title: VD
Name: OUILLETTE, JIM
Address: 4195 S. TAMIAMI TRL PMB #173
City-St-Zip: VENICE, FL 34293

Title: SD
Name: CALLANAN, PAT
Address: 4195 S. TAMIAMI TRL, PMB #173
City-St-Zip: VENICE, FL 34293

Title: D
Name: THOMAS, RON
Address: 6796 GASPARILLA PINES BLVD. UNIT 28
City-St-Zip: ENGLEWOOD, FL 34224

Title: D
Name: GLADMAN, BERNIE
Address: 4195 S TAMIAMI TRL, PMB #173
City-St-Zip: VENICE, FL 34293

I hereby 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 all other like empowered.

SIGNATURE: ON FILE

PRES

03/23/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date