2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02000004652

1. Entity Name



THE WEKIVA CREST HOMEOWNERS ASSOCIATION, INC.								03 MAR 17 PH 4: 56				
Principal Plac	IR ROAD	s	Mailing Address 1551 SANDSPUR ROAD				E TENT		MAR I / SKLTARY (LAHASSE!			
MAITLAND FL 32751 MAITLANI				AND FL 32751								
2. Principal Place of Business 3. Mailing Address					dress							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State					4. FEI Number				oplied For ot Applicable
Zip		Country	Zip			Country		5. Certificate of	Status Desired		\$8.75 Add	ditional
	6. Name	and Address of Curren	<u> </u> Registere	ed Agent				7. Name and Ac	Idress of New F	Registered		
			_			Name				_		
WALKER, BERRY J JR.						Street A	ddress (F	P.O. Box Number is	Not Acceptable	∍)		
235 SOUTH MAITLAND AVENUE									· · · · · · · · · · · · · · · · · · ·		-	
SUITE 216 MAITLAND FL 32751											la a	
						City				FL	Zip Cod	e
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re FILE NOW: FEE IS \$61.25 9. Election Campa Trust Fund Cont					npaign F	inancing		when reinstating) \$5.00 May Be Added to Fees			k Payable tment of S	
10.		OFFICERS AND D	IRECTORS		11.			DDITIONS/CHAN	GES TO OFFICE	RS AND D	RECTORS IN	10
TITLE NAME THE STREET ADDRESS CITY-ST-ZIP		ANTHONY DSPUR ROAD) FL 32751		☐ Delete				8 :04 03/24/0	DO144 301009	530 020	□ Change 5.0 **61.25	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1551 SAN	G, Alan H DSPUR ROAD) FL 32751		☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	235 MAITI	Berry J Jr. And Avenue South) Fl 32751	+, STE. 21	Detete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		E Et address - St-Zip	VSD Lours ISST MAIT	P.ShAssav SandSpui LAND, FL	RD 32751		☐ Change	Addition
TITLE NAME Street Address City-St-Zip				☐ Delete				 1	8		☐ Change	Addition
TITLE NAME STREET ADDRESS				☐ Delete				•	- 		☐ 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:

CR2E037 (10/02)