

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755030

**FILED
Mar 12, 2013
Secretary of State
CC6025611291**

Entity Name: WEDGEWOOD TENNIS VILLAS OF TUSCAWILLA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

931 S. SEMORAN BLVD.
SUITE 214
WINTER PARK, FL 32792

Current Mailing Address:

931 S. SEMORAN BLVD.
SUITE 214
WINTER PARK, FL 32792 US

FEI Number: 59-2377316

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARA MANAGEMENT, INC.
931 S. SEMORAN BLVD.
SUITE 214
WINTER PARK, FL 32792 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name SOLOMON, DOREEN E
Address 931 S. SEMORAN BLVD- STE 214
City-State-Zip: WINTER PARK FL 32792

Title P
Name WALLACE, BRIAN
Address 931 S. SEMORAN BLVD- STE 214
City-State-Zip: WINTER PARK FL 32792

Title T
Name REUTER, BARBARA M
Address 931 S. SEMORAN BLVD- STE 214
City-State-Zip: WINTER PARK FL 32792

Title D
Name HENDRICKS, JAMES M
Address 931 S. SEMORAN BLVD- STE 214
City-State-Zip: WINTER PARK FL 32792

Title S
Name COMBS, ANNE
Address 931 S. SEMORAN BLVD- STE 214
City-State-Zip: WINTER PARK FL 32792

Title D
Name THOMAS, FRED
Address 931 S. SEMORAN BLVD- STE 214
City-State-Zip: WINTER PARK FL 32792

Title DIRECTOR
Name RAMIREZ, LEECA
Address 931 S. SEMORAN BLVD- STE 214
City-State-Zip: WINTER PARK FL 32792

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: BRIAN WALLACE

PRESIDENT

03/12/2013

Electronic Signature of Signing Officer/Director Detail

Date