

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000007472

**FILED  
Apr 23, 2013  
Secretary of State  
CC9151974137**

**Entity Name:** WILDER TRACE OF CENTRAL FLORIDA HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2000 E. EDGEWOOD DR  
#214  
LAKELAND, FL 33803

**Current Mailing Address:**

2000 E. EDGEWOOD DR  
#214  
LAKELAND, FL 33803

**FEI Number: 59-3432565**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

KIEFER, SANDRA  
467 LINDSEY DRIVE  
LAKELAND, FL 33809 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 PD  
Name COLBY, GORDN  
Address 487 LINDSEY DRIVE  
City-State-Zip: LAKELAND FL 33809

Title VP  
Name WASCHEK, MITCH  
Address 479 LINDSEY DRIVE  
City-State-Zip: LAKELAND FL 33809

Title S  
Name POPE, JOHN  
Address 8346 MITCHALL DRIVE  
City-State-Zip: LAKELAND FL 33809

Title T  
Name WHITE, RICH  
Address 8343 CHANCE DRIVE  
City-State-Zip: LAKELAND FL 33809

Title DIRECTOR  
Name THERIALT, ROGER  
Address 8331 CHANCE DR  
City-State-Zip: LAKELAND FL 33809

*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: MITCH WASCHEK**

**VP**

**04/23/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date