


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 17, 2006 8:00 am**  
**Secretary of State**

04-17-2006 90350 033 \*\*\*\*61.25

<b>DOCUMENT # 728467</b> 1. Entity Name <b>FIDDLER'S BEND VILLAS ASSOCIATION, INCORPORATED</b>					
Principal Place of Business <b>C/O AMELIA ISLAND MANAGEMENT 3000 FIRST COAST HWY AMELIA ISLAND, FL 32034</b>			Mailing Address <b>C/O AMELIA ISLAND MANAGEMENT 3000 FIRST COAST HWY AMELIA ISLAND, FL 32034</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>52-1046213</b>	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>GREGORY, DAVID AMELIA ISLAND MANAGEMENT 3000 FIRST COAST HIGHWAY AMELIA ISLAND, FL 32034</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
		<b>Make check payable to Florida Department of State</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>WAGNER, RICHMOND</b>		NAME		
STREET ADDRESS	<b>3405 SEA MARSH RD</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>AMELIA ISLAND, FL</b>		CITY-ST-ZIP		
TITLE	STD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>WOLLGAST, LEE</b>		NAME		
STREET ADDRESS	<b>3418 SEA MARSH ROAD</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>AMELIA ISLAND, FL 32034</b>		CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>SMEETON, TOM</b>		NAME	<b>3401 Sea Marsh Road</b>	
STREET ADDRESS	<b>3401 FIDDLER'S BEND</b>		STREET ADDRESS	<b>Amelia Island, FL 32034</b>	
CITY-ST-ZIP	<b>AMELIA ISLAND, FL 32034</b>		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>KLEIN, NICHOLAS</b>		NAME	<b>D Forristal, Dr. Tom</b>	
STREET ADDRESS	<b>3428 SEA MARSH ROAD</b>		STREET ADDRESS	<b>3427 Sea Marsh Road</b>	
CITY-ST-ZIP	<b>AMELIA ISLAND, FL 32034</b>		CITY-ST-ZIP	<b>Amelia Island, FL 32034</b>	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>LATIMER, HAL</b>		NAME		
STREET ADDRESS	<b>3438 SEA MARSH RD</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>FERNANDINA BEACH, FL 32034</b>		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b> <i>Lee Wollgast</i>			<b>3/8/06</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		