

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743720

FILED
May 26, 2005
Secretary of State

Entity Name: WEATHERED WOOD, A CONDOMINIUM, INC.

Current Principal Place of Business:

PO BOX 901
SHALIMAR, FL 32579 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 901
SHALIMAR, FL 32579 US

New Mailing Address:

FEI Number: 59-2771031 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HUNTER, RICK D
PO BOX 901
SHALIMAR, FL 32579 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: PD () Delete
Name: HUNTER, RICK
Address: 22 LONGWOOD DR
City-St-Zip: SHALIMAR, FL 32579

Title: D () Delete
Name: GARY, WILLIAM L
Address: 3425 ROBIN HOOD RD
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: WALBERG, JERRY
Address: 2803 COLD STREAM DRIVE
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: KUTZ, VINCENT
Address: 3373 FOLEY DR.
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: ERWIN, PERRY
Address: 220 JOHN KNOX ROAD SUITE 4
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: OESCHGER, JOHN F
Address: 2432 LANOLOT DRIVE
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: RICK D. HUNTER

PRES

05/26/2005

Electronic Signature of Signing Officer or Director

Date