## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 743720** 

FILED Apr 30, 2007 Secretary of State

Entity Name: WEATHERED WOOD, A CONDOMINIUM, INC.

**Current Principal Place of Business: New Principal Place of Business:** PO BOX 901 516 E. GORRIE DR. SHALIMAR, FL 32579 ST. GEORGE ISLAND, FL 32579 US US **Current Mailing Address: New Mailing Address:** PO BOX 901 SHALIMAR, FL 32579 US FEI Number: 59-2771031 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUNTER, RICK D HUNTER, RICK D PO BOX 901 19 POQUITO RD. SHALIMAR, FL 32579 SHALIMAR, FL 32579 US 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: 04/30/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition HUNTER, RICK HUNTER, RICK Name: Name: 22 LONGWOOD DR Address: 19 POQUITO RD Address: City-St-Zip: SHALIMAR, FL 32579 City-St-Zip: SHALIMAR, FL 32579 Title: Title: ( ) Delete () Change () Addition GARY, WILLIAM L Name: Name: Address: 3425 ROBIN HOOD RD Address: City-St-Zip: TALLAHASSEE, FL City-St-Zip: Title: () Delete Title: () Change () Addition WALBERG, JERRY Name: Name: 2803 COLD STREAM DRIVE Address: Address: City-St-Zip: TALLAHASSEE, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: KUTZ, VINCENT Name: Address: 3373 FOLEY DR. Address: City-St-Zip: TALLAHASSEE, FL City-St-Zip: Title: () Delete Title: () Change () Addition ERWIN, PERRY Name: Name: 220 JOHN KNOX ROAD SUITE 4 Address: Address: City-St-Zip: TALLAHASSEE, FL City-St-Zip: Title: () Delete Title: () Change () Addition OESCHGER, JOHN F Name: Name: Address: 2432 LANDOLOT DRIVE Address: TALLAHASSEE, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 MR 04/30/2007