

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90288 013 ****61.25

DOCUMENT # 745245

1. Entity Name
**A PLACE IN THE WOODS PROPERTY OWNERS ASSOCIATION
INC.**



Principal Place of Business
**9012 GREEN MEADOWS WAY
PALM BEACH GARDENS FL 33418**

Mailing Address
**9012 GREEN MEADOWS WAY
PALM BEACH GARDENS FL 33418**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2298523**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JUSTIER, JOHN
9142 GREEN MEADOWS WAY
PALM BEACH GARDENS FL 33418**

Name **Philip Gelina**
Street Address (P.O. Box Number is Not Acceptable)
9116 Greenmeadows Way
City **Palm Bch. Gardens FL** Zip Code **33418**

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: **Philip Gelina, PD** **1/12/03**

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
NAME **VD
WEAVER, DANIEL D**
STREET ADDRESS **9103 GREENMEADOWS WAY**
CITY-ST-ZIP **WEST PALM BEACH FL 33418**

TITLE Change Addition
NAME **VD
John Justice**
STREET ADDRESS **9142 Greenmeadows Way**
CITY-ST-ZIP **Palm Bch. Gdns, FL 33418**

TITLE Delete
NAME **SD
SIMON, SHELLEY**
STREET ADDRESS **9142 GREEN MEADOW WAY**
CITY-ST-ZIP **WEST PALM BEACH FL 33418**

TITLE Change Addition
NAME **SD
Mark ~~Vetter~~ Vetter**
STREET ADDRESS **9243 Green meadows way**
CITY-ST-ZIP **Palm Bch. Gdns, FL 33418**

TITLE Delete
NAME **TD
AMEND, ASHLEY**
STREET ADDRESS **9156 GREEN MEADOWS WAY**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33418**

TITLE Change Addition
NAME **TD
Kathy McDowell**
STREET ADDRESS **9240 Green meadows way**
CITY-ST-ZIP **Palm Bch Gdns FL 33418**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME **MD
Kristine Peters**
STREET ADDRESS **9241 Green meadows way**
CITY-ST-ZIP **Palm Bch Gdns FL 33418**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 another like empowered.

SIGNATURE: **Philip Gelina** **1/12/03** **(561) 339-2649**

CR2E037 (10/02)