

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -6 AM 11:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 747485 (1)
1. Corporation Name
GREENWOOD LAKES HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business Mailing Address
172 DUBLIN DRIVE 172 DUBLIN DRIVE
LAKE MARY FL 32746 LAKE MARY FL 32746
US US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
06/04/1979 08/08/1994
4. FEI Number Applied For
59-2059327 Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees
7. Nonprofit with IRS 501(c)(3) \$68.75 Supplemental
Tax Exempt Status ☐ Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WERT, DEBRA L.
172 DUBLIN DRIVE
LAKE MARY FL 32746

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME WERT, JAY D.
STREET ADDRESS 172 DUBLIN DRIVE
CITY- ST- ZIP LAKE MARY FL
TITLE VD
NAME HAWKINS, HOWARD
STREET ADDRESS 176 DUBLIN DRIVE
CITY- ST- ZIP LAKE MARY FL
TITLE SD
NAME WERT, DEBRA
STREET ADDRESS 172 DUBLIN DRIVE
CITY- ST- ZIP LAKE MARY FL
TITLE TD
NAME DYE, SHANE
STREET ADDRESS 225 DUBLIN DRIVE
CITY- ST- ZIP LAKE MARY FL
TITLE D
NAME TAYLOR, YVONNE
STREET ADDRESS 289 DUBLIN DRIVE
CITY- ST- ZIP LAKE MARY FL
TITLE D
NAME BACON, NITA
STREET ADDRESS 317 DUBLIN DR.
CITY- ST- ZIP LAKE MARY FL 32746

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

Delete

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Debra L. Wert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/95

Date

323-2300-6407

(Typed Name #)