

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 752384

**FILED**  
**Jan 27, 2010**  
**Secretary of State**

**Entity Name:** WILKINSON WOODS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3450 WILKINSON WOODS DR  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

3450 WILKINSON WOODS DR  
SARASOTA, FL 34231

**New Mailing Address:**

**FEI Number:** 59-2084763

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BECKER & POLIAKOFF, PA  
6230 UNIVERSITY PARKWAY  
SUITE 204  
SARASOTA, FL 34240 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: P  
Name: STEVENS, ROBERT  
Address: 3444 WILKINSON WDS DR  
City-St-Zip: SARASOTA, FL 34231

Title: S  
Name: LADWIG, PATRICIA A  
Address: 3432 WILKINSON WOODS DR  
City-St-Zip: SARASOTA, FL 34231

Title: T  
Name: BREKHUS, JANE  
Address: 3416 WILKINSON WOODS DRIVE  
City-St-Zip: SARASOTA, FL 34231

Title: VP  
Name: HUTSON, LORRAINE  
Address: 3447 WILKINSON WOODS DR  
City-St-Zip: SARASOTA, FL 34231

Title: D  
Name: YOCHUM, DOUGLAS  
Address: 3510 WILKINSON WOODS DR  
City-St-Zip: SARASOTA, FL 34231

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA A LADWIG

S

01/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date