


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90290 008 ****61.25

DOCUMENT # 754457					
1. Entity Name WILDWOOD OF DEER CREEK PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 1852 WILDWOOD LN EAST DEERFIELD BEACH, FL 33442		Mailing Address 1852 WILDWOOD LN EAST DEERFIELD BEACH, FL 33442			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2055745	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent GAGLIANO, KAREN A ESQ 185 NW SPANISH RIVER BLD., STE 290 BOCA RATON, FL 33431				7. Name and Address of New Registered Agent	
Name				Name	
Street Address (P.O. Box Number is Not Acceptable)				Street Address (P.O. Box Number is Not Acceptable)	
City				City	
				FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	Pres SPILLERT, HOLLY	<input checked="" type="checkbox"/> Delete	TITLE	Pres Barbara Siebola	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SPILLERT, HOLLY		NAME	426 Wildwood Lane E	
STREET ADDRESS	456 WILDWOOD LANE EAST		STREET ADDRESS	Deerfield Beach, FL 33442	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP		
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	VPD	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KYMAN, DICK		NAME	Jay Naoh Tsheim	
STREET ADDRESS	381 WILDWOOD LANE EAST		STREET ADDRESS	1858 Wildwood Trail	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP	Deerfield Beach, FL 33442	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RILEY, JOAN		NAME	Richard Kymon	
STREET ADDRESS	239 WILDWOOD CIRCLE		STREET ADDRESS	381 Wildwood Lane E.	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP	Deerfield Beach, FL 33442	
TITLE	Pres BULLOCK, RICE	<input checked="" type="checkbox"/> Delete	TITLE	Treas. Rice L. Bullock	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BULLOCK, RICE		NAME	480 Wildwood Lane E	
STREET ADDRESS	480 WILDWOOD LANE E		STREET ADDRESS	Deerfield Beach, FL 33442	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	Secy	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEFFERDINANDO, LIDI		NAME	CARL Lohm	
STREET ADDRESS	1865 WILDWOOD LANE		STREET ADDRESS	1844 Wildwood Trail	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		CITY-ST-ZIP	Deerfield Beach, FL 33442	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Rice L. Bullock		Date: 3/23/05		Daytime Phone #: 954-429-0629	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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