


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90205 041 ****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				7. Name and Address of New Registered Agent	
GAGLIANO, KAREN A ESQ 185 NW SPANISH RIVER BLD., STE 290 BOCA RATON, FL 33431				Name <i>Becker + Pollakoff</i>	
				Street Address (P.O. Box Number is Not Acceptable) <i>Donna D. Berger</i>	
				<i>3111 Stirling Road.</i>	
				City <i>Fort Lauderdale</i> FL Zip Code <i>33312-6523</i>	
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 <i>Donna D. Berger</i> <i>4/25/06</i> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		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	P	<input checked="" type="checkbox"/> Delete		TITLE	P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SIRBOLA, BARBARA			NAME	<i>Judi De Ferdinando</i>
STREET ADDRESS	456 WILDWOOD LANE EAST			STREET ADDRESS	<i>1865 Wildwood Lane N.</i>
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442			CITY-ST-ZIP	<i>Deerfield Beach, FL 33442</i>
TITLE	VPD	<input checked="" type="checkbox"/> Delete		TITLE	VPD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NAOLHSHEIM, JAY			NAME	<i>Carolyn Danna</i>
STREET ADDRESS	1858 WILDWOOD TR			STREET ADDRESS	<i>448 Wildwood LN. E.</i>
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442			CITY-ST-ZIP	<i>Deerfield Beach, FL 33442</i>
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE	T. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KYMAN, RICHARD			NAME	<i>Bob Cox</i>
STREET ADDRESS	381 WILDWOOD LANE E			STREET ADDRESS	<i>1964 Wildwood Lane N.</i>
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442			CITY-ST-ZIP	<i>Deerfield Beach, FL 33442</i>
TITLE	T	<input checked="" type="checkbox"/> Delete		TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BULLOCK, RICE L			NAME	<i>Carol Loba</i>
STREET ADDRESS	480 WILDWOOD LANE E			STREET ADDRESS	<i>352 Wildwood Lane East</i>
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442			CITY-ST-ZIP	<i>Deerfield Beach, FL 33442</i>
TITLE	S	<input type="checkbox"/> Delete		TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOHMART, CARL			NAME	<i>(Title Only!)</i>
STREET ADDRESS	1844 WILDWOOD TR			STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442			CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	
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 exemptions contained 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 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: <i>Judi De Ferdinando</i> <i>President</i> <i>4/21/06</i> <i>561-7065097</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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