

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756039

FILED
Feb 23, 2009
Secretary of State

Entity Name: WILD OAK BAY VILLA V OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1226 N TAMiami TRAIL
#200
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1226 N TAMiami TRAIL
#200
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 59-2156481

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, BARBARA
1226 N TAMiami TRAIL #200
SARASOTA, FL 34236 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: VPD () Delete
Name: TERPIN, MARK
Address: 6422 EGRET LANE
City-St-Zip: BRADENTON, FL 34210

Title: D () Delete
Name: CLARK, ROBERT
Address: 6308 PELICAN DR.
City-St-Zip: BRADENTON, FL 34210

Title: PD () Delete
Name: BABCOCK, EDWIN
Address: 6304 PELICAN DR
City-St-Zip: BRADENTON, FL 34210

Title: SD () Delete
Name: KAUFMAN, MARSHALL
Address: 6420 WOOD OWL CIRCLE
City-St-Zip: BRADENTON, FL 34210

Title: TD () Delete
Name: PAUL, SUZANNE
Address: 6306 PELICAN DR.
City-St-Zip: BRADENTON, FL 34210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: EDWIN BABCOCK

PD

02/23/2009

Electronic Signature of Signing Officer or Director

Date