

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2004 8:00 am
Secretary of State

04-06-2004 90025 026 ****61.25

DOCUMENT # 759860

1. Entity Name

GREENWOOD LAKES - UNIT 3 HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

PO BOX 953184
LAKE MARY FL 32795-3184

Mailing Address

PO BOX 953184
LAKE MARY FL 32795-3184

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

74-2004853

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



MOORE

CR2E037 (11/03)

6. Name and Address of Current Registered Agent

BENNETT, EVELINE
413 LAKESHORE DRIVE
LAKE MARY FL 32746

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: ☐ Delete
NAME: JACK, KAUFMAN
STREET ADDRESS: 521 LAKESHORE CIRCLE
CITY-ST-ZIP: LAKE MARY FL 32746

TITLE: ☐ Delete
NAME: BENNETT, EVELINE
STREET ADDRESS: 413 LAKESHORE CIRCLE
CITY-ST-ZIP: LAKE MARY FL 32746

TITLE: ☐ Delete
NAME: DEMARTINI, JOHN
STREET ADDRESS: 445 LAKESHORE DR.
CITY-ST-ZIP: LAKE MARY FL 32746

TITLE: ☐ Delete
NAME: SANDY, DEAN
STREET ADDRESS: 404 LAKESHORE DR
CITY-ST-ZIP: LAKE MARY FL 32746

TITLE: ☐ Delete
NAME: DONAHUE, JOHN
STREET ADDRESS: 332 BUTTONWOOD DR.
CITY-ST-ZIP: LAKE MARY FL 32746

TITLE: ☐ Delete
NAME: RATCHFORD, BILL
STREET ADDRESS: 441 LAKESHORE DR.
CITY-ST-ZIP: LAKE MARY FL 32746

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME: Brian Akus
STREET ADDRESS: 464 Lakeshore Dr
CITY-ST-ZIP: LM, FL 32746 Deed Restriction

TITLE: ☐ Change ☐ Addition
NAME: Block Captain
STREET ADDRESS: Mike Norris
CITY-ST-ZIP: 321 Buttonwood Drive

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-3-04

Date

401-328 6352

Daytime Phone #