2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State
04-18-2002 90445 033 ****61.25

DOCUMENT # 763817

1. Entity Name

WILDWOOD VILLAS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
58 WILDWOOD TR. ORMOND BEACH FL 32174	58 WILDWOOD TR. ORMOND BEACH FL 32174

741268

DO NOT WRITE IN THIS SPACE

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 59-2607763 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent:	7. Name and Address of New Registered Agent
WRIGHT, RONALD J C/O ARCONICS CORP 130 SO RIDGEWOOD AVENUE SUITE 2 DAYTONA BEACH FL 32114	Name: Gloria B. Ray Street Address (P.O. Box Number is Not Acceptable): 11 Wildwood Trail City: Ormond Beach FL Zip Code: 32174

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.

SIGNATURE: Gloria B. Ray — Gloria B. Ray, Treasurer — 04/09/02
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

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS COX, ANNE 3 WILDWOOD TRAIL ORMOND BEACH FL 32174	☐ Delete	PD COX,ANNE 3 WILDWOOD TRAIL ~~ORMOND BEACH FL 32174~~	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TS WRIGHT, RONALD J 1 WILDWOOD TRAIL ORMOND BCH FL 32174	☒ Delete	TD RAY, GLORIA B 11 WILDWOOD TRAIL ORMOND BEACH, FL 32174	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MILANO, ANNE 40 WILDWOOD TRAIL ORMOMD BEACH FL 32174	☒ Delete	D KIEL, JOHN 32 WILDWOOD TRAIL ORMOND BEACH, FL 32174	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP NAPE, SYLVIA 7 WILDWOOD TRAIL ORMOND BEACH FL 32174	☐ Delete	D ALLATIN, ROBERT 34 WILDWOOD TRAIL ORMOND BEACH FL 32174	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS HAWS, KIRBY 19 WILDWOOD TRAIL ORMOND BEACH FL 32174	☒ Delete	SD SMITH, NANCY 23 WILDWOOD TRAIL	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WOMBLE, BRENDA 20 WILDWOOD TRAIL ORMOND BEACH FL 32174	☐ Delete	DS WOMBLE, BRENDA 20 WILDWOOD TRAIL ORMOND BEACH FL 32174	☒ Change ☐ Addition

CR2E037 (9/01)

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: Gloria B. Ray — SIGNATURE REQUIRED — Gloria B. Ray, Treas. — 04/09/02 — (386)673-5280
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #