

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763817

FILED
Feb 03, 2011
Secretary of State

Entity Name: WILDWOOD VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

58 WILDWOOD TR.
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

58 WILDWOOD TR.
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-2607763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, LYNNE J
1124 GLENGAD RUN
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

BARKER, PATRICIA A
C/O NORTH SHORE MANAGEMENT GROUP, INC.
533 N. NOVA ROAD, #215A
ORMOND BEACH, FL 32174 US

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: PATRICIA A. BARKER

02/03/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: FERGUSON, WILLIAM
Address: 26 WILDWOOD TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP
Name: WOMBLE, BRENDA
Address: 20 WILDWOOD TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: HOPKINS, DON
Address: 15 WILDWOOD TR.
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: RAY, GLORIA
Address: 11 WILDWOOD TR
City-St-Zip: ORMOND BEACH, FL 32174

Title: ST
Name: WARD, PAT
Address: 12 WILDWOOD TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM FERGUSON

P

02/03/2011

Electronic Signature of Signing Officer or Director

Date