

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2003 8:00 am
Secretary of State

04-04-2003 90077 049 ***150.00

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DOCUMENT # J22484

1. Entity Name
WOODBIDGE MOBILE HOME OWNERS, INC.



Principal Place of Business
11055 SE FEDERAL HWY #15
HOBE SOUND FL 33455
US

Mailing Address
PO BOX 65
JENSEN BEACH FL 34958
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-2664245

Applied For
Not Applicable

Zip

Country

Zip

Country

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BONAN, ELIZABETH P ESQ.
CORNETT, GOUGE, ROSS & EARLE, P.A.
401 EAST OSCEOLA STREET
STUART FL 34994

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 \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	PORTER, HOMER	11055 SE FEDERAL HWY #33	HOBE SOUND FL 33455	<input type="checkbox"/>
VPD	WOLFE, BILL	11055 SE FEDERAL HWY #3	HOBE SOUND FL 33455	<input checked="" type="checkbox"/>
D	TYLUS, BRUCE	11055 S.E. FEDERAL HWY #90	HOBE SOUND FL	<input checked="" type="checkbox"/>
SD	DAVIS, GILBERT	11055 SE FEDERAL HWY #10	HOBE SOUND FL 33455	<input checked="" type="checkbox"/>
D	DOAK, SAM	11055 SE FED. HWY #31	HOBE SOUND FL 33455	<input type="checkbox"/>
TD	GOLDEN, NORMAN	11055 SE FEDERAL HWY #43	HOBE SOUND FL 33455	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TD	PHILLIPS, ELLIOT	11055 SE FEDERAL HWY #51	HOBE SOUND, FL 33455	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SD	POTTER, GRACE	11055 SE FEDERAL HWY #20	HOBE SOUND, FL 33455	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	LEKIN, PATRICIA	11055 SE FEDERAL HWY #12	HOBE SOUND, FL 33455	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	PREVILLE, ELIZABETH	11055 SE FEDERAL HWY #92	HOBE SOUND, FL 33455	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 607, 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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/03
Date

772-545-7823
Daytime Phone #

CR2E034 (10/02)

Attachment

90071902

D

522484

Addition

FIKE, CHARLES

11055 SE Federal Hwy #47

Hobe Sound, FL 33455

D

Addition

Spinney, Edward

11055 SE Federal Hwy #96

Hobe Sound, FL 33455