

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 20, 2001 8:00 am
Secretary of State

08-20-2001 90074 041 ****70.00

DOCUMENT # N00000001279

1. Entity Name

WOODSLANE ESTATE HOMEOWNERS, ASSOCIATION, INC.

Principal Place of Business

Mailing Address

4855 SMITHFIELD
 MELBOURNE FL 32934

4855 SMITHFIELD
 MELBOURNE FL 32934

2. Principal Place of Business

3. Mailing Address

2505 Woods Lane

2505 Woods Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Melbourne FL

City & State

Melbourne FL

Zip

32934

Country

USA

Zip

32934

Country

USA

4. FEI Number

59-3630356

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

WILBOURNE, DANNY L
 4855 SMITHFIELD
 MELBOURNE FL 32934

Name: DANNY L Wilbourne

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

2505 Woods Lane

City Melbourne

FL

Zip Code

32934

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 DANNY L Wilbourne

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

TITLE D
 NAME WILBOURNE, DANNY L
 STREET ADDRESS 4855 SMITHFIELD
 CITY-ST-ZIP MELBOURNE FL 32934 ☐ Delete

TITLE D
 NAME WILBOURNE, JEFF
 STREET ADDRESS 2557 LEEWOOD BLVD
 CITY-ST-ZIP MELBOURNE FL 32934 ☐ Delete

TITLE D
 NAME WILBOURNE, PAMELA
 STREET ADDRESS 4855 SMITHFIELD
 CITY-ST-ZIP MELBOURNE FL 32934 ☐ Delete

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DANNY L Wilbourne ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 2505 Woods Lane
 CITY-ST-ZIP Melbourne FL 32934

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

TITLE PAMELA Wilbourne ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 2505 Woods Lane
 CITY-ST-ZIP Melbourne FL 32934

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

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:

NOTARIAL SIGNATURE REQUIRED

8-1-01

321-757-8163

CR2E037 (10/00)