

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2004
Secretary of State**

DOCUMENT# N01000003399

Entity Name: WORTHINGTON PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8618 CRESTGATE CR
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

8618 CRESTGATE CR
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 01-0635212 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAAD, MAT T
8618 CRESTGATE CR
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: RAAD, MAT T
Address: 7061 GRAND NATIONAL DRIVE #121
City-St-Zip: ORLANDO, FL 32819

Title: VTD (X) Delete
Name: SCALA, FRANCO
Address: 7061 GRAND NATIONAL DRIVE #121
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: RAAD, CAROLYN
Address: 7061 GRAND NATIONAL DRIVE #121
City-St-Zip: ORLANDO, FL 32819

Title: D (X) Delete
Name: SCALA, YVONNE
Address: 7061 GRAND NATIONAL DRIVE #121
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: RAAD, MAT T
Address: 8618 CRESTGATE CR
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RAAD, CAROLYN
Address: 8618 CRESTGATE CR
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MAT T RAAD

PSD

04/28/2004

Electronic Signature of Signing Officer or Director

_____ Date