2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2006
Secretary of State

DOCUMENT# N01000004101

Entity Name: OLD WIRE RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

890 SW APPLEWOOD GLEN
FORT WHITE, FL 32038

New Principal Place of Business:

Current Mailing Address:

890 SW APPLEWOOD GLEN
FORT WHITE, FL 32038

New Mailing Address:

FEI Number: 59-3733371 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DUNCAN, VICKIE L
890 SW APPLEWOOD GLEN
FORT WHITE, FL 32038 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: P ( ) Delete
Name: HOUSTON, BELINDA R
Address: 866 SW APPLEWOOD GLEN
City-St-Zip: FORT WHITE, FL 32038

Title: VP ( ) Delete
Name: LOWERY, ROBERT
Address: 241 SW APPLEWOOD GLEN
City-St-Zip: FORT WHITE, FL 32038

Title: S (X) Delete
Name: MILEY, PAMELA J
Address: 891 SW APPLEWOOD GLEN
City-St-Zip: FORT WHITE, FL 32038

Title: T ( ) Delete
Name: DUNCAN, VICKIE L
Address: 890 SW APPLEWOOD GLEN
City-St-Zip: FORT WHITE, FL 32038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: T/S (X) Change ( ) Addition
Name: DUNCAN, VICKIE L
Address: 890 SW APPLEWOOD GLEN
City-St-Zip: FORT WHITE, FL 32038

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: VICKIE L. DUNCAN T/S 02/21/2006

Electronic Signature of Signing Officer or Director — Date