2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

3/11/2

FILED
Jul 28, 2005 8:00 am
Secretary of State
03-11-2005 90314 030 ****61.25

DOCUMENT # N02000001544

1. Entity Name
WEDGEFIELD FIREWISE COMMUNITY, INC.

Principal Place of Business	Mailing Address
20744 REYNOLDS PKWY. ORLANDO, FL 32833	20744 REYNOLDS PKWY. ORLANDO, FL 32833

02062005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 02-0565552 ☐ 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
PRESCOTT, MARY E 20744 REYNOLDS PKWY. ORLANDO, FL 32833	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHAIR PRESCOTT, MARY 20744 REYNOLDS PKWY. ORLANDO, FL 32833	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VICE CHAIR FLEMING, EDWARD 4275 BANCROFT BLVD. ORLANDO, FL 32833	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TREASURER LEAVITT, DONALD 20525 MAJESTIC ST. ORLANDO, FL 32833	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR/SECRETARY	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	HELEN M BARGER 2247 ARCHER BLVD ORLANDO FL 32833	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Mary E Prescott MARY E PRESCOTT 2/04/05 4075687762
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 060085151
#N02000001544

WEDGEFIELD FIREWISE COMMUNITY, INC.

20744 Reynolds Parkway
Orlando, FL 32833

July 4, 2005

Florida Department of State
Secretary of State, Glenda E. Hood
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Notice of Intent to Dissolve

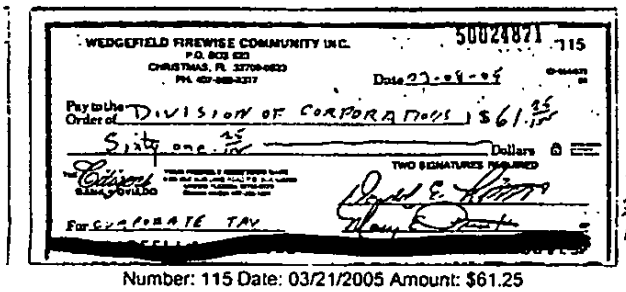
To Whom It May Concern:

This past week, we received your Notice of Intent to Dissolve our corporation. Please find enclosed a copy of our Annual Report and cancelled check. These documents were mailed on March 9, 2005 and the check was processed through our bank on March 21, 2005. If additional documention is required to complete our annual report, please advise us immediately.

Your prompt attention to this matter and a response would be appreciated.

Very truly yours,

Mary E. Prescott
Chair


WEDGEFIELD FIREWISE COMMUNITY INC.
P.O. BOX 833
CHRISTMAS, FL 32709-0833
PH. 407-568-3217

50024871 715

Date 03-09-05

Pay to the Order of DIVISION OF CORPORATIONS $61.25

Sixty one 25/100 Dollars

TWO SIGNATURES REQUIRED

Citizens

For CORPORATE TAX

000560

ATTACHMENT
Code 035151
#N02000001544

Number: 115 Date: 03/21/2005 Amount: $61.25

ATTACHMENT 06025151
#N02000001544

000660

Date 4/18/05 Page 1
Account Number 200015725

P.O. Box 620729
Oviedo, FL 32762-0729
Phone 407 365 6611

WEDGEFIELD FIREWISE COMMUNITY INC
PO BOX 623
CHRISTMAS FL 32709-0623

STATEMENT

---------- CHECKING ACCOUNTS ----------

CD SPECIAL BEING OFFERED FOR A LIMITED TIME!
Visit our website for more information www.cboviedo.com or
Call 407-365-6611 or 407-365-2212, or 407-366-4868

ORGANIZATION		Number Of Enclosures	2
Account Number	200015725	Statement Dates 3/17/05 thru	4/18/05
Previous Balance	870.54	Days In The Statement Period	33
1 Deposits/Credits	573.00	Average Ledger	1,250
1 Checks/Debits	61.25	Average Collected	1,205
Basic Fee	.00		
Interest Paid	.00		
Ending Balance	1,382.29		

---------- DEPOSITS ----------

Date	Description	Amount
3/25	DEPOSIT	573.00

--------- CHECKS --------- --------- CHECKS --------- --------- CHECKS --------

DATE	ITEM	AMOUNT
3/21	115	61.25

*Indicates Skip in Check Number

----- BALANCES ------		----- BALANCES ------		----- BALANCES ------	
Date	Balance	Date	Balance	Date	Balance
3/17	870.54	3/21	809.29	3/25	1,382.29