

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003850

FILED
Apr 12, 2012
Secretary of State

Entity Name: WILDER BROOKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8441 SPLIT CREEK CIR
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

8441 SPLIT CREEK CIR
LAKELAND, FL 33809

New Mailing Address:

8313 SPLIT CREEK CIR
LAKELAND, FL 33809

FEI Number: 05-0568250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, JEFFRY S
8441 SPLIT CREEK CIR
LAKELAND, FL 33809 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: PRES
Name: GREEN, JEFFRY
Address: 8441 SPLIT CREEK CIRCLE
City-St-Zip: LAKELAND, FL 33809

Title: SEC
Name: AVELLA, BARBARA
Address: 8313 SPLIT CREEK CIR
City-St-Zip: LAKELAND, FL 33809

Title: TREA
Name: GARCIA, PABLO
Address: 8417 SPLIT CREEK CIRCLE
City-St-Zip: LAKELAND, FL 33809

Title: BRD
Name: PACKARD, AL
Address: 8457 SPLIT CREEK CIRCLE
City-St-Zip: LAKELAND, FL 33809

Title: BRD
Name: RAY, GREG
Address: 8345 SPLIT CREEK CIRCLE
City-St-Zip: LAKELAND, FL 33809

Title: VP
Name: MARTINEZ, WILSON
Address: 8385 SPLIT CREEK CIRCLE
City-St-Zip: LAKELAND, FL 33809

I hereby 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 all other like empowered.

SIGNATURE: JEFFRY S. GREEN

PRES

04/12/2012

Electronic Signature of Signing Officer or Director

Date