

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)-

FILED
Feb 27, 2004 8:00 am
Secretary of State

02-06-2004 90007 034 ***150.00

DOCUMENT # N03000000970

1. Entity Name
VILLAGE OF WEATHERLY SUBDIVISION HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**1410 NW 13TH STREET
SUITE 2
GAINESVILLE FL 32601**

Mailing Address
**1410 NW 13TH STREET
SUITE 2
GAINESVILLE FL 32601**

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

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



MOORE CR2E037 (11/03)

4. FEI Number
55-0836450

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**SHEMA, RONALD J
1410 NW 13TH STREET
SUITE 2
GAINESVILLE FL 32601**

7. Name and Address of New Registered Agent
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 _____
Signature, typed or printed name of registered agent and list if applicable. (NOTE: Registered Agent signature required when resigning) DATE _____

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

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	PSD SHEMA, RONALD J 1410 NW 13TH STREET GAINESVILLE FL 32601 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD SHEMA, CAROLYN B 1410 NW 13TH STREET GAINESVILLE FL 32601 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRURY, JOHN 1614 NW 10 STREET GAINESVILLE FL 32609 ☐ 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
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: Ronald J. Shema **1-28-04** **352 3764608**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

RONALD J. SHEMA

66403662

Attachments - 003000000970

AMOUNT OF DEPOSIT (Do NOT type, please print.) DOLLARS CENTS		Employer only one TYPE OF TAX		Bank only one TAX PERIOD	
Mark the "X" in this box only if there is a change to Employer Identification Number (EIN) or Name. See instructions on page 1.	BANK NAME/ DATE STAMP	EIN 55-0836450 061812		IRS USE ONLY ☐	
		VILLAGE OF WEATHERLY SUBDIVISION HOMEOWNERS ASSOCIATION INC PO BOX 357475 GAINESVILLE FL 32635-7475		☒ 941 ☒ 945 ☒ 990-C ☒ 1120 ☒ 943 ☒ 990-T	
		☒ 720 ☒ 990-PF ☒ CT-1 ☒ 1042		☒ 1st Quarter ☒ 2nd Quarter ☒ 3rd Quarter ☒ 4th Quarter	
		☒ 940 ☒ 940		62	
		15-2 Telephone number ()		FOR BANK USE IN MICR ENCODING	

Federal Tax Deposit Coupon
Form 8109 (Rev. 12-2002)