2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04000008744

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May 03, 2005 8:00 am
Secretary of State

05-03-2005 90073 019 ****70.00

	NTER GARDEN COMMUNIT RATION, INC.	Y DEVELOPMENT				03 0 3 2 000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,	.00
830 KLONDI	ce of Business IKE STREET DEN, FL 34787	Mailing Address 830 KLONDIKE STREET WINTER GARDEN, FL 3478	7			NII 8120 8811 8210 68	iii ma hi ma ini h	1211 144 21 DIV II B 41	
2. Principal P	Place of Business XCV COMMUNITY CENTER	3. Mailing Address PO Box 783	142						
Suite, Apt.	* et. Klondike Street	Suite, Apt. #, etc.				Chg-NP	CR2E0	37 (10/03)	<u>.</u>
City & Stat	ter Garden, FL		N,FL		4. FEI Number	58221		⊢ + -	pplied For ot Applicable
3478	87 USA	34787 1	Country ISA		5. Certificate of	· · · · · · · · · · · · · · · · · · ·	Ø	\$8.75 Add Fee Require	
	6. Name and Address of Current R	egistered Agent .	Name		7. Name and A	ddress of New F	Registered A	Agent	
1007 STU	WILDER, CHARLIE M 1007 STUCKI TERRACE			dress (I	P.O. Box Number i	is Not Acceptable	e)		
MINIER	GARDEN, FL 34787								
			City			··	FL	Zip Cod	e
8. The above the obligat	e named entity submits this statement for tions of registered agent.	the purpose of changing its regis	tered office or	register	ed agent, or both,	in the State of Fl	orida. I am	familiar with,	and accept
SIGNATURE .									
	Signature, typed or printed name of registered agent an	d trile il applicable. (NOTE: Regis	stered Agent signatu	re required	when reinstating)		DATE		
	Filing Fee Is \$61.25 Due by May 1, 2005	9. Election Campaig Trust Fund Contri	n Financing bution.		\$5.00 May Be Added to Fees			payable t	
10.	OFFICERS AND DIRE		11.		ADDITIONS/CHAN	IGES TO OFFICE	RS AND DI	RECTORS IN	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SNELL, XERXES 15243 STARLEIGH ROAD WINTER GARDEN, FL 34787		TITLE NAME STREET ADDRESS CITY+ST-ZIP	1120	othy Brun Maxey Her Gard	Drive	ነብ <i>ገጸ</i> 기	☐ Change	Addition
TITLE	S MODOWN NAMOV			Ð		•	1101	Change	Addition
NAME Street address City-St-Zip	MORGAN, NANCY 789 HULL ISLAND DR OAKLAND, FL 34787	:	NAME STREET ADDRESS CITY+ST-ZIP	830	ward Scot) East Bar Wer Gard	y Street	רערט		
TITLE NAME STREET ADDRESS CITY+ST-ZIP	V BOULER, HAROLD 813 E BAY STREET WINTER GARDEN, FL 34787		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ı	VICE CONTE		-101	☐ Change	☐ Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP	T GOODWIN, VINCENT 1302 SELBYDON WAY: WINTER GARDEN, FL 34787	Delete	TITLE NAME STREET ADDRESS	T Charl 100	lie Mae Wil 7 Stuckie – Iter Garde	lder Terrace	 187	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOULER, PRESTON 813 E BAY STREET WINTER GARDEN, FL 34787		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u> </u>	ner oaraç	10 04	<u> </u>	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORGAN, LONZA 789 HULL ISLAND DR OAKLAND, FL 34787		TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition
979 Ibarah	certify that the information supplied with the								

4-27-05 (407)697-6127

ATTACHMENT 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

	ANIONE II									
DOCUI 1. Entity Nam EAST WII CORPOR			1[27	177	987	<u> </u>				
Principal Place of Business Mailing Address B30 KLONDIKE STREET B30 KLONDIKE STREET WINTER GARDEN, FL 34787 WINTER GARDEN, FL 34787			'87		HOO					
2. Principal Place of Business Mailing Address Po Box 7831 Suite, Apt. #, etc. 3. Mailing Address Po Box 7831 Suite, Apt. #, etc.					04070005					
8301	Klondike Street					g-NP	CR2E037 (- Unal For	
Winter Garden, FL Winter Garden,					4. FEI Number 41215	8991		Not	plied For t Applicable	
3478°	7 Country USA 3	34787	Country USA		5. Certificate of Sta	itus Desired		.75 Addi Required		
6. Name and Address of Current Registered Agent					7. Name and Addr	ess of New Re	gistered Age	nt		
WILDER, CHARLIE M 1007 STUCKI TERRACE WINTER GARDEN, FL 34787			Name Street A	\ddress (f	P.O. Box Number is N	lot Acceptable))			
******	JANDEN, LE OTIOI									
			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 title	e if applicable. (NOTE: Re	egistered Agent signat	ture required	I when reinstating)		DATE			
	Filing Fee is \$61.25 Due by May 1, 2005 9. Election Campaign Trust Fund Contribu				\$5.00 May Be Added to Fees		ake check pa da Departme	-		
10. III LE	OFFICERS AND DIRECT	FORS ☐ Delete	11. TITLE	D '	ADDITIONS/CHANGE	S TO OFFICER		TORS IN Change	10 Addition	
VAME	SNELL, XERXES	□ Delete	NAME	Geor	rge Bostwic	K 0		, Grange	Muddon	
STREET ADDRESS City-St-ZIP	15243 STARLEIGH ROAD WINTER GARDEN, FL 34787		STREET ADDRESS CITY-ST-ZIP	1599 Win	s W. Crown ter Garden	FI 3478	d '1			
TITLE	S	☐ Delete	TITLE	D_				Change	₩ Addition	
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CITY-\$T-ZIP	OAKLAND, FL 34787		CITY-ST-ZIP	Wir	wher Garden		187			
TITLE Name	V BOULER, HAROLD	Delete	TITLE NAME	Dan	Thursh			Change	Addition	
STREET ADDRESS	813 E BAY STREET		STREET ADDRESS	1015	Johnson Maxey Dr					
CITY-ST-ZIP FITLE	WINTER GARDEN, FL 34787	Delete	CITY-ST-ZIP	D.	ter Garden	<u>1, FL</u>		Change	Addition	
NAME	GOODWIN, VINCENT	ES borono	NAME	Jan	nes Rogers	5 _ 🛶	نــا	CHENGE	T Modition	
STREET ADDRESS City-St-ZIP	1302 SELBYDON WAY WINTER GARDEN, FL 34787		STREET ADDRESS CITY-ST-ZIP	1454 600	Godsen St veland FL	7661 34736				
ПГЕ	D	☑ Delete	TITLE	D				Change	Addition	
MAME	j -	e Delae	1	101						
STREET ADDRESS	BOULER, PRESTON 813 E BAY STREET	EJ Deide	NAME Street address	Chai 4744	rlene Wrigh 4 Maranda	Trde				
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	BOULER, PRESTON 813 E BAY STREET	□ Delete	STREET ADDRESS	700 000 474	4 Maraudā ando, FL 3 200 Bruuso	Circle 2818 101		Change	₹ Addition	
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CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP 12. 1 hereby condicated of the cor	BOULER, PRESTON 813 E BAY STREET WINTER GARDEN, FL 34787 D MORGAN, LONZA 789 HUŁL ISLAND DR OAKLAND, FL 34787 certify that the information supplied with this exportation or the receiver or trustee empowere d, or on an attachment with an address, with a	filing does not qualify for the end accurate and that my sed to execute this report as all other like empowered.	STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP e exemption sta signature shall f required by Cha	Ui Nated in Se	4 Marauda ando, FL 3 20b Brunso 0 Maxey D ther Garder same legal effect as if	Circle 2818 Drive N: FL 31 made under or	further certify to	that the in an officer o	or director	