

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 01, 2006 8:00 am
Secretary of State

04-27-2006 90191 012 ****61.25

DOCUMENT # N05000006969

1. Entity Name
WILDWOOD WEST PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business
**100 SW ALBANY AVE, SUITE 110
STUART, FL 34994**

Mailing Address
**100 SW ALBANY AVE, SUITE 110
STUART, FL 34994**

66017676



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04212006

Chg-NP

CR2E037 (11/05)

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**SCHAFER, MARTIN
100 SW ALBANY AVE, SUITE 110
STUART, FL 34994**

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 title if applicable

(NOTE: Registered Agent signature required when retreating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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 PD ☐ Delete
NAME SCHAFER, MARTIN
STREET ADDRESS 100 SW ALBANY AVE, SUITE 110
CITY-ST-ZIP STUART, FL 34994

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME MORGINSTIN, ELIEZER
STREET ADDRESS 100 SW ALBANY AVE, SUITE 110
CITY-ST-ZIP STUART, FL 34994

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME GREENE, JOHN
STREET ADDRESS 100 SW ALBANY AVE, SUITE 110
CITY-ST-ZIP STUART, FL 34994

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME CHAPMAN, RICHARD
STREET ADDRESS 100 SW ALBANY AVE, SUITE 110
CITY-ST-ZIP STUART, FL 34994

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changes.

SIGNATURE: X

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT

66017676

Wildwood West Property Owners' Association, Inc.

May 23, 2006

Florida Department of State
Division of Corporations
Annual Reports Section
P.O. Box 6478
Tallahassee, FL 32314

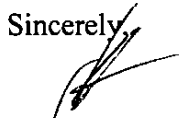
Sent via regular mail

Re: Annual filing
N05000006969

To Whom It May Concern:

As requested. Please see the updated annual report. An FEI is not applicable at this time as the project has not begun.

Sincerely,



Keisha Yen
Ext. 107

kmy: enclosures

100 SW Albany Avenue ▪ Suite 110 ▪ Stuart, FL 34994
Tel : 772-463-0194 ▪ Fax: 772-463-0195