

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # N05000008526 1. Entity Name THE ESTATES AT LIMONA WOODS HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business 613 LIMONA WOODS DRIVE BRANDON, FL 33510	Mailing Address 613 LIMONA WOODS DRIVE BRANDON, FL 33510
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DO NOT WRITE IN THIS SPACE



01082008 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-3867096	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ROBINSON, WILLIAM S
613 LIMONA WOODS DRIVE
BRANDON, FL 33510

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBINSON, WILLIAM S 613 LIMONA WOODS DRIVE BRANDON, FL 33510
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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 like empowered.

SIGNATURE: William S. Robinson 1-9-07 813-681-1529

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #