2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N05000011165

Entity Name: WILDMERE VILLAGE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

736 WILDMERE VILLAGE COVE
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

736 WILDMERE VILLAGE COVE
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 16-1760663 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROCHELLE, PAUL PRESIDE
736 WILDMERE VILLAGE COVE
LONGWOOD, FL 32750 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: D ( ) Delete
Name: ROCHELLE, PAUL PRESIDE
Address: 736 WILDMERE VILLAGE COVE
City-St-Zip: LONGWOOD, FL 32750

Title: D ( ) Delete
Name: ROCHELLE, DONNA L
Address: 736 WILDMERE VILLAGE COVE
City-St-Zip: LONGWOOD, FL 32750

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: ESPINOSA, JORGE VP
Address: 718 WILDMERE VILLAGE COVE
City-St-Zip: LONGWOOD, FL 32750

Title: SECT ( ) Change (X) Addition
Name: BOKTOR, NABEEL SECT
Address: 701 WILDMERE VILLAGE COVE
City-St-Zip: LONGWOOD, FL 32750

Title: TREA ( ) Change (X) Addition
Name: ROCHLLE, DONNA L TREASUR
Address: 736 WILDMERE VILLAGE COVE
City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PAUL ROCHELLE PRES 04/29/2009

Electronic Signature of Signing Officer or Director — Date