

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N05000012266

1. Entity Name

WILLIAMSBURG CONDOMINIUMS OF COLLEGE PARK
ASSOCIATION, INC.



FILED
Aug 14, 2008 08:00 AM
Secretary of State



Principal Place of Business
1059A EDGEWATER DR
ORLANDO FL 32801

Mailing Address
1059A EDGEWATER DR
ORLANDO FL 32801

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
NO-T APPLICABLE

Applied For

Not Applicable

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

WETTACH, JOSEPH C.L.
315 E ROBINSON STE
STE 600
ORLANDO FL 32801

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 reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By September 3, 2008

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 PD
MCEVER, KAREN ☐ Delete
STREET ADDRESS
CITY-ST-ZIP 1059A EDGEWATER DR
ORLANDO FL 32801

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP 000000957670
08/14/08-80001-012 61.25

TITLE
NAME VPD
BAKER, ALENE ☐ Delete
STREET ADDRESS
CITY-ST-ZIP 1059A EDGEWATER DR
ORLANDO FL 32801

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

TITLE
NAME SD
WETTACH, JO ☐ Delete
STREET ADDRESS
CITY-ST-ZIP 1059A EDGEWATER DR
ORLANDO FL 32801

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

TITLE
NAME TD
BORSOI, ED ☐ Delete
STREET ADDRESS
CITY-ST-ZIP 1059A EDGEWATER DR
ORLANDO FL 32801

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
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 like empowered.

SIGNATURE:

Edward E. Borsoi - Treasurer

8/12/08

403 841-0496