

ANNUAL REPORT (AR)

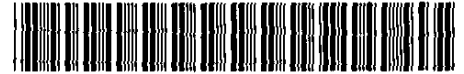
DOCUMENT # N06000004765

1. Entity Name

DANIA WOODS HOMEOWNERS ASSOCIATION INC.



FILED
Feb 21, 2007 08:00 AM
Secretary of State



1st MOORE CR2E037 (10/06)

Principal Place of Business

404 S.E. 7TH STREET
DANIA BEACH FL 33004

Mailing Address

404 S.E. 7TH STREET
DANIA BEACH FL 33004

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

404 SE 7th St Dania, FL 33004

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DANIA Beach

City & State

DANIA FL 33004

4. FEI Number

59-2047748

Applied For

Not Applicable

Zip

33004

Country

BROWARD

Zip

33004

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAZZETTA, MARY JO
404 S.E. 7TH STREET
DANIA BEACH FL 33004

7. Name and Address of New Registered Agent

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 re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

TITLE	T	☐ Delete
NAME	MAZZETTA, MARY JO	
STREET ADDRESS	404 S.E. 7TH STREET	
CITY-STATE-ZIP	DANIA BEACH FL 33004	
TITLE	P	☐ Delete
NAME	ZUKER, LINDA	
STREET ADDRESS	406 S.E. 7TH STREET	
CITY-STATE-ZIP	DANIA BEACH FL 33004	
TITLE	VP	☐ Delete
NAME	UNGER, MELISSA	
STREET ADDRESS	402 S.E. 7TH STREET	
CITY-STATE-ZIP	DANIA BEACH FL 33004	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME	U00000643096	
STREET ADDRESS	03/01/07-80072-003 61.25	
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

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

Mary Jo Mazzetta

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/07

Date

954 925-4694

Daytime Phone #