

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007614

FILED
May 02, 2007
Secretary of State

Entity Name: CORONADO AT WILDWOOD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4501 BEVERLY AVENUE
JACKSONVILLE, FL 32210

New Principal Place of Business:

5851 TIMUQUANA ROAD
JACKSONVILLE, FL 32210

Current Mailing Address:

4501 BEVERLY AVENUE
JACKSONVILLE, FL 32210

New Mailing Address:

P.O. BOX 65908
ORANGE PARK, FL 32065

FEI Number: 20-5988124 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ENSELL, KURT
2455 CAMPHORWOOD COURT
ORANGE PARK, FL 32065 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: DP () Delete
Name: ATLEE, KENYON S
Address: 4501 BEVERLY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: CRISP, DALE K
Address: 4501 BEVERLY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: DVPT () Delete
Name: BRADFORD, ERIC N
Address: 4501 BEVERLY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: S () Delete
Name: BRADFORD, ERIC N
Address: 4501 BEVERLY AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ATLEE, KENYON S
Address: 5851 TIMUQUANA ROAD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D (X) Change () Addition
Name: CRISP, DALE K
Address: 5851 TIMUQUANA ROAD
City-St-Zip: JACKSONVILLE, FL 32210

Title: DVPT (X) Change () Addition
Name: BRADFORD, ERIC N
Address: 5851 TIMUQUANA ROAD
City-St-Zip: JACKSONVILLE, FL 32210

Title: S (X) Change () Addition
Name: BRADFORD, ERIC N
Address: 5851 TIMUQUANA ROAD
City-St-Zip: JACKSONVILLE, FL 32210

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: KENYON S ATLEE

DP

05/02/2007

Electronic Signature of Signing Officer or Director

_____ Date