

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 23, 1999 8:00 am
Secretary of State

03-23-1999 90022 021 ****61.25

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DOCUMENT # N06098

1. Corporation Name

WOODLAND ACRES RETREAT PROPERTY OWNER'S ASSOCIATION, INC.

Principal Place of Business

C/O GEORGE FEGAN
1831 PALO DURO BLVD
FT. MYERS FL 33917
US

Mailing Address

C/O GEORGE FEGAN
1831 PALO DURO BLVD
FT. MYERS FL 33917
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

11/09/1984

4. FEI Number

59-2555904

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

FEGAN, GEORGE
C/O GEORGE FEGAN
1831 PALO DURO BLVD
FT. MYERS FL 33917

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *George J. Fegan*

GEORGE J. FEGAN, V.P. D.

DATE **3-17-99**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE **VPD**
NAME **FEGAN, GEORGE**
STREET ADDRESS **1831 PALO DURO BLVD**
CITY-ST-ZIP **FT. MYERS FL 33917**

TITLE **D** ☒ DELETE
NAME **WILSON, BILL**
STREET ADDRESS **1913 INDIAN COURT**
CITY-ST-ZIP **LAKE LAND FL 33803**

TITLE **ST** ☐ DELETE
NAME **JOINER, KATE**
STREET ADDRESS **102 REEDY CREEK DRIVE**
CITY-ST-ZIP **FROSTPROOF FL 33843**

TITLE **PD** ☒ DELETE
NAME **CURRY, JOHN**
STREET ADDRESS **102 REEDY CREEK DRIVE**
CITY-ST-ZIP **FROSTPROOF FL 33843**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☒ Addition

1.1 TITLE **PD**
1.2 NAME **Richards, Mike**
1.3 STREET ADDRESS **115 Reedy Creek Drive**
1.4 CITY-ST-ZIP **Frostproof, FL 33843** ☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE **D** ☒ Change ☐ Addition
3.2 NAME **Curry, John**
3.3 STREET ADDRESS **102 Reedy Creek Drive**
3.4 CITY-ST-ZIP **Frostproof, FL 33843** ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

George J. Fegan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George Fegan 3-17-99 (941) 543 8213

Date

Daytime Phone #

CR2E037 (1/98)