

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001502

FILED
Mar 10, 2009
Secretary of State

Entity Name: WOLF CREEK JEFFERSON COUNTY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2507 CALLAWAY RD - # 101
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

2507 CALLAWAY RD - # 101
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 20-2461890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODWYNE, OWEN
1924 TEMPLE DR
TALLAHASSEE, FL 32303 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: PD () Delete
Name: MACFARLAND, JAMES W
Address: 2507 CALLAWAY RD - # 101
City-St-Zip: TALLAHASSEE, FL 32303

Title: VPTD () Delete
Name: BUTLER, VAN NESS JR
Address: 34 BANFILL RD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: SD () Delete
Name: MCFARLAND, KAREN K JR
Address: 2507 CALLAWAY RD - # 101
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JAMES W. MACFARLAND

PD

03/10/2009

Electronic Signature of Signing Officer or Director

Date