

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007236

FILED
May 01, 2009
Secretary of State

Entity Name: WANDERING PONDS HOA, INC.

Current Principal Place of Business:

22144 STATE ROAD 46
FLORIDA TERRITORIAL LAND CO/CHAMP GROUP
SORRENTO, FL 32776

New Principal Place of Business:

22144 STATE ROAD 46
C/O CHAMPION GROUP
SORRENTO, FL 32776

Current Mailing Address:

22144 STATE ROAD 46
FLORIDA TERRITORIAL LAND CO/CHAMP GROUP
SORRENTO, FL 32776

New Mailing Address:

PO BOX 952259
LAKE MARY, FL 32795

FEI Number: 26-2319958 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

FLORIDA TERRITORIAL LAND COMPANY
101 TIMBERLACHEN CIR
SUITE 202 / CHAMPION GROUP
LAKE MARY, FL 32746 US

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: P () Delete
Name: WEKIVA TRAILS, LLC
Address: 22144 STATE ROAD 46
City-St-Zip: SORRENTO, FL 32776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WEKIVA TRAILS, LLC

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date