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FILED

Feb 06 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N08545 (8)  
1. Corporation Name  
WOODETTE VIEW CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business  
2616 WOODETTE DR #2  
DUNEDIN FL 34698

Mailing Address  
2616 WOODETTE DR #2  
DUNEDIN FL 34698

3. Date Incorporated or Qualified

04/04/1985

4. FEI Number

59-2910783

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SELVAGGIO, SANDRA (MISSPELLED)  
21616 WOODETT DR #2  
DUNEDIN FL 34698

81 Name  
SELVAGGIO, SANDRA  
82 Street Address (P.O. Box Number is Not Acceptable)  
2616 WOODETTE DR #2  
83 DUNEDIN  
84 City  
FL 85 Zip Code  
34698

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 SANDRA SELVAGGIO

(NOTE: Registered Agent signature required when reinstating)

DATE 1/4/98

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE  
NAME SELVAGGIO, PETER  
STREET ADDRESS 2616 WOODETTE DR.#2  
CITY-ST-ZIP DUNEDIN FL

TITLE STD ☒ DELETE  
NAME SELVAGGIO, MARJORIE  
STREET ADDRESS 2616 WOODETTE DR.#2  
CITY-ST-ZIP DUNEDIN FL

TITLE D ☒ DELETE  
NAME SELVAGGIO, SANDRA  
STREET ADDRESS 2616 WOODETTE DR #2  
CITY-ST-ZIP DUNEDIN FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

1.1 TITLE ~~PD~~ PD ☒ Change ☐ Addition  
1.2 NAME SANDRA SELVAGGIO  
1.3 STREET ADDRESS 2616 WOODETTE DR. #2  
1.4 CITY-ST-ZIP DUNEDIN, FL 34698

2.1 TITLE STD ☒ Change ☐ Addition  
2.2 NAME John Lynch  
2.3 STREET ADDRESS 216 Barker Hill Rd  
2.4 CITY-ST-ZIP Dunedin, FL 34698

3.1 TITLE D ☒ Change ☐ Addition  
3.2 NAME Dorothy Lynch  
3.3 STREET ADDRESS 216 Barker Hill Rd  
3.4 CITY-ST-ZIP Dunedin, FL 34698

4.1 TITLE ☐ Change ☐ Addition  
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.

SIGNATURE: SANDRA SELVAGGIO SIGNATURE REQUIRED

1/4/98

CR2E037 (10/97)