

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08627

FILED
Jan 17, 2006
Secretary of State

Entity Name: WEDGE WOOD OF PALM HARBOR HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2635 BILGORE GROVE BOULEVARD
PALM HARBOR, FL 34684 US

New Principal Place of Business:

Current Mailing Address:

2635 BILGORE GROVE BLVD.
PALM HARBOR, FL 34684 US

New Mailing Address:

FEI Number: 59-2521662 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZACUR, RICHARD A
5200 CENTRAL AVE.
ST PETERSBURG, FL 33707 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: PDD () Delete
Name: WALSH, ADELE
Address: 681 FIRST CT.
City-St-Zip: PALM HARBOR, FL 34684

Title: VPD () Delete
Name: SATTINGER, ROY
Address: 2618 10TH CT
City-St-Zip: PALM HARBOR, FL 34684

Title: S () Delete
Name: GMITTER, HUBERTA
Address: 2632 2ND CT.
City-St-Zip: PALM HARBOR, FL 34684

Title: T () Delete
Name: LLOYD, JACQUELINE M
Address: 2702 12TH CT.
City-St-Zip: PALM HARBOR, FL

Title: ASD () Delete
Name: LEWIS, PEGGY
Address: 2617- 2ND CT
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: LEWIS, PEGGY
Address: 2617 2ND CT.
City-St-Zip: PALM HARBOR, FL 34684

Title: T (X) Change () Addition
Name: DICKERT, GENE
Address: 2605 6TH CT.
City-St-Zip: PALM HARBOR, FL 34684

Title: ASD (X) Change () Addition
Name: LLOYD, JACQUELINE
Address: 2702 12TH CT
City-St-Zip: PALM HARBOR, FL 34684

I hereby certify that the information supplied with this filing does not qualify for the 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: GENE DICKERT

T

01/17/2006

Electronic Signature of Signing Officer or Director

_____ Date