2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008
Secretary of State

DOCUMENT# N10040

Entity Name: WILDWOOD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1454 MARIGOLD DR
LAKELAND, FL 33811

New Principal Place of Business:

1386 BRAMBLEWOOD DR
LAKELAND, FL 33811

Current Mailing Address:

P.O. BOX 7023
LAKELAND, FL 33807

New Mailing Address:

FEI Number: 59-2577431 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALLEN, JAMES
1621 EDGEWOOD DR E
LAKELAND, FL 33803 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:	P	( ) Delete
Name:	CHILTON, STEVE	
Address:	1386 BRAMBLEWOOD	
City-St-Zip:	LAKELAND, FL 33811 US	
Title:	VP	( ) Delete
Name:	MAJORS, SARA	
Address:	1335 BRAMBLEWOOD DRIVE	
City-St-Zip:	LAKELAND, FL 33811 US	
Title:	SEC	( ) Delete
Name:	HOVLID, DEBBIE	
Address:	4767 WILDFLOWER DRIVE	
City-St-Zip:	LAKELAND, FL 33811 US	
Title:	TRE	( ) Delete
Name:	QUEITZSCH, SUSAN	
Address:	1329 BRAMBLEWOOD DRIVE	
City-St-Zip:	LAKELAND, FL 33811	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P	(X) Change ( ) Addition
Name:	CHILTON, STEVE	
Address:	1386 BRAMBLEWOOD DR	
City-St-Zip:	LAKELAND, FL 33811 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	( ) Change (X) Addition
Name:	PRUITT, PHIL	
Address:	4847 WILDFLOWER DRIVE	
City-St-Zip:	LAKELAND, FL 33811	
Title:	D	( ) Change (X) Addition
Name:	STEPP, RANDY	
Address:	4928 WILDFLOWER DR	
City-St-Zip:	LAKELAND, FL 33811	

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 ALLEN RA 04/23/2008

Electronic Signature of Signing Officer or Director — Date