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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N13292

1. Corporation Name

COLONY IN THE WOOD HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

4000 SOUTH CLYDE MORRIS BLVD.
DAYTONA BEACH FL 32119

Mailing Address

4000 SOUTH CLYDE MORRIS BLVD.
DAYTONA BEACH FL 32119



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

02/04/1986

4. FEI Number

59-2891606

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

LOB, MYRNA
33 WILLOW IN THE WOOD
DAYTONA BEACH FL 32119

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

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 *ESTHER ROSS*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE SD ☐ DELETE
NAME LUNDE, BARBARA
STREET ADDRESS 39 PINE IN THE WOOD
CITY-ST-ZIP DAYTONA BEACH FL

TITLE VD ☐ DELETE
NAME RACO, TONY
STREET ADDRESS 34 OAK IN THE WOOD
CITY-ST-ZIP DAYTONA BEACH FL

TITLE TD ☐ DELETE
NAME ROSS, ESTHER
STREET ADDRESS 40 OAK IN THE WOOD
CITY-ST-ZIP DAYTONA BEACH FL

TITLE PD ☒ DELETE
NAME JAGDE, CHARLES
STREET ADDRESS 53 MAPLE IN THE WOOD
CITY-ST-ZIP DAYTONA BEACH FL

TITLE VD ☒ DELETE
NAME POEHNERT, DON
STREET ADDRESS 9 PALM IN THE WOOD
CITY-ST-ZIP DAYTONA BEACH FL

TITLE VD ☒ DELETE
NAME DORSUCH, ROBERT
STREET ADDRESS 27 CYPRESS IN THE WOOD
CITY-ST-ZIP DAYTONA BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition
1.2 NAME DON. ZITER
1.3 STREET ADDRESS 48 OAK IN THE WOOD
1.4 CITY-ST-ZIP DAYTONA BEACH FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: *ESTHER ROSS* 4/14/99 322-9462
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/198)