

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90026 002 ****61.25

DOCUMENT # N19265

1. Entity Name

**WEST LAKE GREENS PROPERTY OWNERS'
ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

1932 NEW BEDFORD DR
SUN CITY CENTER FL 33573
US

1932 NEW BEDFORD DR
SUN CITY CENTER FL 33573
US

2. Principal Place of Business

1913 NEW BEDFORD DR.

3. Mailing Address

1913 NEW BEDFORD DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SUN CITY CENTER, FL

City & State

SUN CITY CENTER, FL

Zip
33573

Country
USA

Zip
33573

Country
USA

4. FEI Number

59-2869954

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GUNDERSON, CHARLES W
1932 NEW BEDFORD DR
SUN CITY CENTER FL 33573

7. Name and Address of New Registered Agent

Name **KLEINEDLER, ELLEN**

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

1913 NEW BEDFORD DRIVE

City **SUN CITY CENTER**

FL

Zip Code
33573

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

ELLEN KLEINEDLER *Ellen Kleinedler*

2-13-2006

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME BAUER, ANNABEL
STREET ADDRESS 1916 NEW BEDFORD DR
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE VD ☒ Delete
NAME HALLER, HARLAN
STREET ADDRESS 1937 NEW BEDFORD DR
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE TD ☒ Delete
NAME GUNDERSON, CHARLES
STREET ADDRESS 1932 NEW BEDFORD DR
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE SD ☒ Delete
NAME SUPPO, FRANK
STREET ADDRESS 1938 NEW BEDFORD DR
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE D ☐ Delete
NAME HALLER, JEAN
STREET ADDRESS 1937 NEW BEDFORD DR
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PP ☒ Change ☐ Addition
NAME CASHDOLLAR, MURRAY
STREET ADDRESS 1809 NEW BEDFORD DRIVE
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE VD ☒ Change ☐ Addition
NAME WICK, GERALD
STREET ADDRESS 1927 NEW BEDFORD DRIVE
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE TD ☒ Change ☐ Addition
NAME KLEINEDLER, ELLEN
STREET ADDRESS 1913 NEW BEDFORD DRIVE
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE SD ☒ Change ☐ Addition
NAME CASHDOLLAR, WAYNE
STREET ADDRESS 1809 NEW BEDFORD DRIVE
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ELLEN KLEINEDLER** *Ellen Kleinedler*

2-14-06

813-633-6276