


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 25, 2007 8:00 am
Secretary of State

05-25-2007 90027 001 ****61.25

DOCUMENT # N21600 1. Entity Name WILKINSON WOODS HOMEOWNERS ASSOCIATION, INC.	
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DO NOT WRITE IN THIS SPACE

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50001650

2. Principal Place of Business 7842 Meridale Dr	3. Mailing Address 7842 Meridale Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State WOODVILLE, FL	City & State WOODVILLE, FL
Zip 32305	Country USA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number 59-2860836	Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
	7. Name and Address of Current Registered Agent	
	Name JOHN DENNIS BODIFORD Street Address (P.O. Box Number is Not Acceptable) 7842 MERIDALE DRIVE City TALLAHASSEE FL Zip Code 32305	

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  **John Dennis Bodiford President** **April 30, 2007**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FEE IS \$61.25
Initial or Amended UBR**

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 NAME STREET ADDRESS CITY - ST - ZIP	John Dennis Bodiford 7842 Meridale Drive Tallahassee, FL 32305	P	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Buddy Porter 8021 Melita Court Tallahassee, FL 32305	V	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Beverly Dotter 8112 Meridale Drive Tallahassee, FL 32305	S	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Terry Pace 8036 Christina Rd. Tallahassee, FL 32305	T	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Michael Baldwin 3333 Rhodes Cemetery Rd. Tallahassee, FL 32305	D	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Christa Tubb 7845 Meridale Drive Tallahassee, FL 32305	D	TITLE NAME STREET ADDRESS CITY - ST - ZIP	

12. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **JOHN DENNIS BODIFORD** **4/30/2007** **850-421-0247**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037B (12/02)