

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

**DOCUMENT # N21600**

1. Entity Name

Wilkinson Woods Homeowners Association, Inc.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

7842 Meridale Dr

3. Mailing Address

P.O. Box 884

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Tallahassee, Florida

City & State  
Woodville, Florida

4. FEI Number 59-2860836

Applied For  
Not Applicable

Zip  
32305

Country

Zip  
32362

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name John Dennis Bodiford

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

7842 Meridale Dr.

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

April 30, 2008

Signature, typed or printed name of registered agent, and date 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

P: John Dennis Bodiford  
7842 Meridale Dr.  
Tallahassee, Florida 32305

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

500127335695  
04/30/08--01014--013 \*\*61.25

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D/V: Millard Porter  
8021 Melita Ct.  
Tallahassee, Florida 32305

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D/T: Terry Pace  
8036 Christina Rd.  
Tallahassee, Florida 32305

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

S: Beverly Dotter  
8112 Meridale Dr.  
Tallahassee, Florida 32305

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D: Michael Baldwin  
3333 Rhodes Cemetery Rd.  
Tallahassee, Florida 32305

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

D: Steve Bailey  
8164 Meridale Dr.  
Tallahassee, Florida 32305

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

4/30/2008

850-421-0247

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037B (12/02)