

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90496 044 ****61.25

DOCUMENT # N24613

1. Entity Name
**WORTHINGTON GLEN COMMUNITY ASSOCIATION, INC.
OF JACKSONVILLE**



Principal Place of Business
P.O. BOX 23506
JACKSONVILLE, FL 32223

Mailing Address
P.O. BOX 23506
JACKSONVILLE, FL 32223

20053707



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04272005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2871068

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KENNEY, KEN
1740 GRASMERE CT.
JACKSONVILLE, FL 32223

Name Ann Webb

Street Address (P.O. Box Number is Not Acceptable)
11802 Wordsworth Ct

City Jacksonville FL Zip Code 32223

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

Ann E Webb

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

(NOTE: Registered Agent signature required when reinstating)

4/27/05

DATE

Filing Fee is \$61.25
Due by May 1, 2005

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	P	<input checked="" type="checkbox"/> Delete
NAME	SMOLIOS, BILL	
STREET ADDRESS	1733 GRASMERE CT.	
CITY-ST-ZIP	JACKSONVILLE, FL 32223	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	HURLEY, STEVE	
STREET ADDRESS	11771 WORDSWORTH CT.	
CITY-ST-ZIP	JACKSONVILLE, FL 32223	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	HILDERBRENDT, JIM	
STREET ADDRESS	1752 GRASMERE CT.	
CITY-ST-ZIP	JACKSONVILLE, FL 32223	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	KENNEDY, KEN	
STREET ADDRESS	1740 GRASMERE CT.	
CITY-ST-ZIP	JACKSONVILLE, FL 32223	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STUBBS, DAVID	
STREET ADDRESS	11734 WORDSWORTH CT.	
CITY-ST-ZIP	JACKSONVILLE, FL 32223	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JONES, DAVID	
STREET ADDRESS	1729 LORD BYRON LANE	
CITY-ST-ZIP	JACKSONVILLE, FL 32223	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	George Botner	
STREET ADDRESS	Grasmere Ct	
CITY-ST-ZIP	Jacksonville, FL 32223	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mark Stauffer	
STREET ADDRESS	Wordsworth Ct	
CITY-ST-ZIP	Jacksonville FL 32223	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bruce Toth	
STREET ADDRESS	Wordsworth Ct.	
CITY-ST-ZIP	Jacksonville FL 32223	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ann Webb	
STREET ADDRESS	11802 Wordsworth Ct.	
CITY-ST-ZIP	Jacksonville FL 32223	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ginny Watson	
STREET ADDRESS	Wordsworth Ct.	
CITY-ST-ZIP	Jacksonville FL 32223	
TITLE	N/A	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 817, 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.

Ann E Webb 4/27/05