## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

	ANNUAL R	EPORT (AR)	en enganta	Apr 26, 2004 8:00 am
DOCUMENT # N25711  1. Entity Name				Apr 26, 2004 8:00 am Secretary of State 04-26-2004 90479 029 ****61.25
HOME OWNERS ASSOCIATION OF WILD ACRES SOCIAL CLUB INC				
Principal Place of Business Mailing Addre		Mailing Address	•	
CLUB HOUSE WILDWOOD FL 34785		C/O JANET SUGAR 308 SHAWN AVE WILDWOOD FL 34785 US		) (SERVICE) EIS HOOF ENN HOOM NEED NEED NEED AVEN AVEN AVEN AVEN AVEN AVEN AVEN AVEN
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		MOORE CR2E037 (11/03)
City & State		City & State		4. FEI Number Applied For S9-2950005 Not Applicable
Zip	Country	Zip	Country	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
CHOAD TANET			Name _	The state of the s
SUGAR, JANET 308 SHAWN AVE WILDWOOD FL' 34785			Street A	ddress (P.O. Box Number is Not Acceptable)
			City	FL Zip Code
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 Janet Sugar, Treasurer Janet Sugar 4/16/04				
Transfer and the second	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: I	Registered Agent signal	ure required when reinstaying) DATE
FILE NOW: FEE IS:\$61:25  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 DIF	RECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE	BAKER, THEODORE	Delete	TITLE	Change ☐ Addition
NAME STREET ADDRESS	810 HAMPSHIRE AVE		NAME STREET ADDRESS	Bull, Thomas 812 Huron Street
CITY-ST-ZIP	WILDWOOD FL 34785		CITY-ST-ZIP	Wildwood FL 34785
TITLE	VP	₩ Delete	TITLE	VP   ☐ Change ☐ Addition
NAME	FINSTER, WANETA		NAME	Landers Poter
STREET ADDRESS	804 MICHIGAN STREET WILDWOOD:FL:34785		STREET ADDRESS	813 Havon Street
*CITY*ST-ZIP*	т	and the second s	· CITY-ST-ZIP ···	Wildwood, FL-34785
TITLE NAME	SUGAR, JANET	Delete	NAME	☐ Change ☐ Addition
STREET ADDRESS	308 SHAWN AVE.		STREET ADDRESS	
CITY-ST-ZIP	WILDWOOD FL 34785		CITY-ST-ZIP	
TITLE	S ANELE	☐ Delete	TITLE	D ☐ Change ☑ Addition
NAME	GUILFOYLE, JANELLE 820 MICHIGAN ST		NAME	Finster Jay 804 Michigan Street Wildwood, FL 34785
STREET ADDRESS CITY-ST-ZIP	WILDWOOD FL 34785		STREET ADDRESS CITY-ST-ZIP	804 Michigan Street
TITLE	D	☑ Delete	TITLE	D
NAME	BERGBIGLER, ANNABELL	≥ Delete	NAME	Lahne, Joyce Change Addition 407 Shawn Avenue
STREET ADDRESS	829 MICHIGAN STREET WILDWOOD FL 34785		STREET ADDRESS	407 Shawn Avenue
C/TY-ST-ZIP	D S4765		CITY-ST-ZIP	Wildwood, FL 34785
TITLE	KLEIN, NICK	☐ Delete	TITLE	Change Addition
NAME STREET ADDRESS	814 HURON STREET		NAME	<b>`</b>
CITY-ST-ZIP	WILDWOOD FL 34785		STREET ADDRESS CITY-ST-ZIP	
12. I hereby	certify that the information supplied with	this filing does not qualify for t	he exemption sta	red 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.				

**FILED** 

SIGNATURE: Sugar Janet Sugar 4/16/04 (352) 748-439)
SIGNATURE: SKAATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #