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**Secretary of State**

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**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N25819**

1. Corporation Name

**M.W. HOMEOWNERS' ASSOCIATION, INC.**

Principal Place of Business

% ESTHER L. MCCULLOUGH  
12522 INDIANA WOODS LANE  
ORLANDO FL 32824-8657

Mailing Address

% ESTHER L. MCCULLOUGH  
12522 INDIANA WOODS LANE  
ORLANDO FL 32824-8657



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

04/08/1988

4. FEI Number

59-2961712

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing ☐

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

MCCULLOUGH, ESTHER L  
12522 INDIANA WOODS LANE  
ORLANDO FL 32824

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE:

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME RIZZUTO, ANTHONY  
STREET ADDRESS 12017 FLORIDA WOODS LANE  
CITY-ST-ZIP ORLANDO FL 32824

TITLE TD ☐ DELETE

NAME MC CULLOUGH, ESTHER L.  
STREET ADDRESS 12522 INDIANA WOODS LANE  
CITY-ST-ZIP ORLANDO FL 32824

TITLE VPD ☒ DELETE

NAME BLADEK, JOHN  
STREET ADDRESS 12755 ILLINOIS WOODS LANE  
CITY-ST-ZIP ORLANDO FL

TITLE SD ☐ DELETE

NAME VANDERBRINK, CAROLYN  
STREET ADDRESS 344 IOWA WOODS CIRCLE WEST  
CITY-ST-ZIP ORLANDO FL 32824

TITLE D ☐ DELETE

NAME MERRITT, GEORGE  
STREET ADDRESS 221 CHICAGO WOODS CIR  
CITY-ST-ZIP ORLANDO FL 32824

TITLE D ☐ DELETE

NAME CHAPMAN, CHARLES  
STREET ADDRESS 13416 BELOIT WOODS LANE  
CITY-ST-ZIP ORLANDO FL 32824

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Esther L. McCullough*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*April 23, 1999*  
Date

Daytime Phone #

CR2E037 (11/98)

0018164