

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2006 8:00 am
Secretary of State

02-09-2006 90040 037 ****61.25

DOCUMENT # N25966



1. Entity Name
**WEDGEWOOD COVE AT SHENANDOAH HOMEOWNERS
ASSOCIATION, INC.**

Principal Place of Business
**561 LOWELL LANE
DAVIE, FL 33325**

Mailing Address
**PO BOX 550142
DAVIE, FL 33355-0142 US**

60013267



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02052006

Chg-NP

CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-1945526

Applied For
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

**BARTOLOMEO, JOHN
561 LOWELL LANE
DAVIE, FL 33325**

Name

Street Address (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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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
**D
JAMES BEVAN
14201 OAK RIDGE DRIVE
DAVIE, FL** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
JOHN BARTOLOMEO
561 LOWELL LANE
DAVIE, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
COLLIER, WILLIAM R
13980 OAK RIDGE RD
DAVIE, FL 33325** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
HIGGINS, TERESA
610 LOWELL LANE
DAVIE, FL 33325** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DAY, ROBIN
620 LOWELL LANE
DAVIE, FL 33325** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FALLAHZADEH, MASTANEH
13950 OAK RIDGE RD
DAVIE, FL 33325** ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
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CITY-ST-ZIP ☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/06/06

954 472 9450