

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2003 8:00 am
Secretary of State

02-26-2003 90181 024 ****61.25

DOCUMENT # N30519

1. Entity Name

WOLF BRANCH VILLAGE ASSOCIATION, INC.



Principal Place of Business

22824 COUGAR CT
SORRENTO FL 32776
US

Mailing Address

P.O. BOX 1184
SORRENTO FL 32776
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2946578**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOEHRING, EDWARD B JR
22824 COUGAR CT.
SORRENTO FL 32776

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 _____

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 DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	SPRINGER, TIMOTHY W	22740 STALLION DR	SORRENTO FL 32776	<input checked="" type="checkbox"/>
VD	GOEHRING, EDWARD B	22824 COUGAR CT	SORRENTO FL 32776	<input type="checkbox"/>
SD	PEARCE, SHERRIE M	32531 WOLF'S TRAIL	SORRENTO FL 32776	<input checked="" type="checkbox"/>
TD	NEMAZIE, ALI A	2978 HARBOUR LANDING WAY	CASSELBERRY FL 32707	<input checked="" type="checkbox"/>
D	HITESHEW, TIMOTHY A	723 S GRANDVIEW ST	MOUNT DORA FL 32757	<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
Secretary	POSNACK, DAN	32936 Wolf's Trail	Sorrento FL 32776	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PD / Treasurer				<input checked="" type="checkbox"/>	<input type="checkbox"/>
VP	Bourne, Gordon	32939 Wolf's Trail	Sorrento, FL 32776	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Vidler, Keith	32905 Wolf's Trail	Sorrento, FL 32776	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward B. Goehring Jr 2/23/03 (952) 383-1648

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)