

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90091 030 ****61.25

DOCUMENT # N32505

1. Entity Name
THE WILDERNESS HOME OWNERS ASSOCIATION INC.



40054945



01032007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3055642 Applied For
Not Applicable

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

7. Name and Address of New Registered Agent
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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

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 | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |
|-------|------------------|--------------------------|---------------------|--|
| P | PELLETIER, ART | 4096 CANNON CT | KISSIMMEE, FL 34746 | <input type="checkbox"/> Delete |
| VD | FERENTINOS, TONY | 3320 WILDERNESS TRAIL | KISSIMMEE, FL 34746 | <input type="checkbox"/> Delete |
| TD | MITCHELL, ROBERT | 4157 BALD EAGLE DR | KISSIMMEE, FL 34746 | <input type="checkbox"/> Delete |
| SD | GRUEBEL, HUGO | 4240 FORT COURAGE CIRCLE | KISSIMMEE, FL 34746 | <input type="checkbox"/> Delete |
| D | TUSKE, JOHN | 4254 FORT COURAGE CIRCLE | KISSIMMEE, FL 34746 | <input type="checkbox"/> Delete |
| D | SALVATORE, GENE | 5141 BLACKPOWDER WAY | KISSIMMEE, FL 34746 | <input type="checkbox"/> Delete |
| P | Ferentinos, Tony | 3220 Wilderness Trail | Kissimmee, Fl 34736 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| VP | Pelletier, Art | 4096 Cannon Ct | Kissimmee, FL 34746 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| D | Wharton, Georgia | 4130 Black Powder Ln. | Kissimmee, Fl 34746 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| | | | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| | | | | <input type="checkbox"/> Change <input type="checkbox"/> 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: Art Pelletier **3-28-07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #