

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

27-95-B-969-0
CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -7 PM 4:13

DOCUMENT # N35975 (4)
1. Corporation Name
THE MANORS AT WEDGEWOOD LAKE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business
6230 BISCAYNE BLVD.
GREENACRES FL 33463

Mailing Address
C/O PROPERTY MGMT RESOURCES
4000 S. 57TH AVE. SUITE 101
LAKE WORTH FL 33463

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/27/1989	3a. Date of Last Report 08/18/1994
4. FEI Number 65-0183464	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
Country	Country
24	29

9. Name and Address of Current Registered Agent

FLATOW, JERRY
C/O PROPERTY MANAGEMENT RESOURCE, INC.
4000 S. 57TH AVE. SUITE 101
LAKE WORTH FL 33463

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

1/25/95

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
NAME	PETTY, GLORIA
STREET ADDRESS	3508 RIDGETREE COURT
CITY-ST-ZIP	GREENACRES FL 33463
TITLE	VD
NAME	SHAMES, BOBBY
STREET ADDRESS	3537 MILLBROOK WAY CIRCLE
CITY-ST-ZIP	GREENACRES FL 33463
TITLE	S
NAME	WAGNER, CHUCK
STREET ADDRESS	3500 MILLBROOK WAY CIRCLE
CITY-ST-ZIP	GREENACRES FL 33463
TITLE	T/D
NAME	BRAUER, BURTON
STREET ADDRESS	6113 POND TREE COURT
CITY-ST-ZIP	GREENACRES FL 33463
TITLE	V/D
NAME	JEFFERS, WILLIAM
STREET ADDRESS	3522 MILLBROOK WAY CIRCLE
CITY-ST-ZIP	GREENACRES FL 33463
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	☒ Change ☐ Addition
	Pd	Anthony Soldano	3527 Millbrook Way Circle	
		Greenacres FL 33463		
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	☐ Change ☐ Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	☐ Change ☐ Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	☒ Change ☐ Addition
	V	Lucy Fatino	3504 Ridge Tree Court	
		Greenacres FL 33463		
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	☒ Change ☐ Addition
	T/D			
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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.

SIGNATURE:

William Jeffers, Vice President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/95