

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

04 APR 21 PM 3:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N36328

1. Entity Name  
WOODBIDGE II HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business  
3145 W. ORANGE COUNTRY CLUB ROAD  
WINTER GARDEN, FL 34787

Mailing Address  
3145 W. ORANGE COUNTRY CLUB ROAD  
WINTER GARDEN, FL 34787

66415697



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04122004

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number

59-3017483

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

BAKER, LYMAN  
3145 W. ORANGE COUNTRY CLUB ROAD  
WINTER GARDEN, FL 34787

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, 2004

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 PD ☐ Delete  
NAME TAILLON, GREG  
STREET ADDRESS 3105 W ORANGE COUNTRY CLUB DR  
CITY-ST-ZIP WINTER GARDEN, FL 34787

TITLE ☐ Change ☐ Addition  
NAME 600033797106  
STREET ADDRESS 04/26/04--01008--021 \*\*\$61.25  
CITY-ST-ZIP

TITLE STD ☐ Delete  
NAME BAKER, LYMAN  
STREET ADDRESS 3145 W. ORANGE COUNTRY CLUB ROAD  
CITY-ST-ZIP WINTER GARDEN, FL 34787

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

TITLE D ☒ Delete  
NAME PEREZ, CHRIS W  
STREET ADDRESS 3225 W. ORANGE COUNTRY CLUB ROAD  
CITY-ST-ZIP WINTER GARDEN, FL 34787

TITLE ☒ Change ☐ Addition  
NAME Deanne L. Pappas  
STREET ADDRESS 3225 W. Orange Country Club Dr.  
CITY-ST-ZIP Winter Garden, FL 34787

TITLE D ☐ Delete  
NAME PESHEK, CHARLES  
STREET ADDRESS 701 SAXBY AVE  
CITY-ST-ZIP ORLANDO, FL 32825

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

TITLE D ☒ Delete  
NAME DEJESUS, EFRAIN A  
STREET ADDRESS P.O. BOX 2167  
CITY-ST-ZIP SAN JUAN, PR 00922

TITLE ☒ Change ☐ Addition  
NAME Russell Black  
STREET ADDRESS 3203 W. Orange Country Club Dr.  
CITY-ST-ZIP Winter Garden, FL 34787

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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:

Lyman Baker Lyman Baker

4/15/04

407-656  
0312

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #