2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36759

FILED Apr 30, 2005 Secretary of State

Entity Name: THE WEDGEWOOD & ROLLING HILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	IESTEAD RD. LA, FL 32505	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	IESTEAD RD. LA, FL 32505	US			
FEI Number:	59-2988261	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
RILEY, ANI 707 W. PIN PENSACO		US	RILEY, ANN R 707 W. PINESTEAD PENSACOLA, FL 32	2505 US	
The above in the State		ubmits this statement for the p	urpose of changing its register	ed office or registered agent, or both,	
SIGNATUR	RE: ANN R. R	ILEY		04/30/2005	
	Electron	c Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () RILEY, ANN R 707 W. PINESTI PENSACOLA, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () JUTSON, WILLI 6425 HAMPTON PENSACOLA, F	RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () WALKER, ANN 703 W. PINESTI PENSACOLA, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FS () LAWRENCE, W 714 WENONAH PENSACOLA, F	ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () SHOEMOE, BEF 701 WENONAH PENSACOLA, F	ST.	Title: T Name: SHOEMOE Address: 701 WENC City-St-Zip: PENSACO		
Title: Name: Address: City-St-Zip:	C () POWELL, HEND 901 W. PINESTI PENSACOLA, F	EAD RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANN R. RILEY P 04/30/2005