

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37683

FILED
Apr 27, 2004
Secretary of State

Entity Name: WYNDAM FOREST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2215 STSTE RD 200
YULEE, FL 32097 US

New Principal Place of Business:

463499 STATE ROAD 200
YULEE, FL 32097 US

Current Mailing Address:

P.O BOX 1987
YULEE, FL 320411987 US

New Mailing Address:

PO BOX 1987
YULEE, FL 320411987 US

FEI Number: 59-2987280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, TERRELL J.
PROPERTY MANAGEMENT SYSTEMS
2215 E. STATE ROAD 200
YULEE, FL 32097 US

Name and Address of New Registered Agent:

POWELL, TERRELL J
463499 STATE ROAD 200
YULEE, FL 32097 US

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.

SIGNATURE: TERRELL J POWELL 04/27/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ZIBBERMAN, LEV
Address: 3882 FAIRBENLS FOREST DR.
City-St-Zip: JACKSONVILLE, FL 32223

Title: STD () Delete
Name: ABRAMS, RICK
Address: 3889 HABERSHAM FOREST DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: NORMAN, DEMERS
Address: 3906 FAIRBENIS FOREST DR.
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: CRABTREE, JOHN
Address: 3874 FAIRBANKS FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

Title: D (X) Change () Addition
Name: DAVIS, GARY
Address: 3826 FAIRBANKS FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

Title: D (X) Change () Addition
Name: JOHNSON, KIRBY
Address: 3817 FAIRBANKS FOREST DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

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: JOHN CRABTREE P/D 04/27/2004

Electronic Signature of Signing Officer or Director Date