

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2005
Secretary of State**

DOCUMENT# N37683

Entity Name: WYNDAM FOREST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

463499 STATE ROAD 200
YULEE, FL 32097 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1987
YULEE, FL 320411987 US

New Mailing Address:

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
463499 STATE ROAD 200
YULEE, FL 32097 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: PEACOCK, BYRON
Address: 3890 HABERSHAM FOREST DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: VPD (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: TERRELL J POWELL

RA

04/28/2005

Electronic Signature of Signing Officer or Director

_____ Date