

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38430

FILED  
Feb 14, 2010  
Secretary of State

**Entity Name:** THE VILLAS AT WEDGEFIELD, PHASE I, MAINTENANCE ASSOCIATION, INC.

**Current Principal Place of Business:**

2563 ALBION AVE  
ORLANDO, FL 32833 US

**New Principal Place of Business:**

**Current Mailing Address:**

2563 ALBION AVE  
ORLANDO, FL 32833 US

**New Mailing Address:**

FEI Number: 65-0207867      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOLDIE, AMY R  
2563 ALBION AVE  
ORLANDO, FL 32833 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: D  
Name: MINERD, GEORGE  
Address: 2506 ALBION AVE.  
City-St-Zip: ORLANDO, FL 32833

Title: PRES  
Name: MITCHELL, HAROLD  
Address: 2611 ALBION AVE  
City-St-Zip: ORLANDO, FL 32833

Title: TRES  
Name: GOLDIE, AMY R  
Address: 2563 ALBION AVE  
City-St-Zip: ORLANDO, FL 32833

Title: VP  
Name: JOHNSON, ELLIS  
Address: 2508 ALBION AVE  
City-St-Zip: ORLANDO, FL 32833

Title: SECT  
Name: GOLDIE, AMY R  
Address: 2563 ALBION AVE  
City-St-Zip: ORLANDO, FL 32833

Title: D  
Name: BARE, PETE  
Address: 2565 ALBION AVE  
City-St-Zip: ORLANDO, FL 32833

I hereby 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 all other like empowered.

SIGNATURE: AMY R GOLDIE

TRES

02/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date