FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS -

FILED Apr 16, 1999 8:00 am § Secretary of State

04-16-1999 90040 019 ****61.25

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DOCUI	VENT#N	39430												==
WENON/ INC.	AH PLACE TOWN	HOMES HO	MEOWNE	RS ASSOCIA	TION,						.	 -		
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Principal Place		Malling Address					((0.010)	11 486 (111 6 1 8 (11	01688 (118 <u>5</u> 8611 81	en elen el	an airn ai	O(4 B) B) (180)		
311 WENONAH #12	1 PLACE	311 WENONAH PLACE												
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							3 Data Inco	morated or C	hualifod				1	
- '	lace of Business	2a. Mailing Address					3. Date Incorporated or Qualifed 08/06/1990							
Suite, Apt.	# etc / -	Suite, Apt. #, etc.					4. FEI Number Applied For							
22	****#1ろ	27 413					NOT APPLICABLE Not Applicable						1	
City & State		City & State					5 Continue of Status Decired \$8.75 Additional							
23	•	28					5. Certificate of Status Desired Fee Required						1	
Zip Country			Zip Country					6. Election Campaign Financing \$5.00 May Be						
24	25		29	30	<u>) </u>				d Contributio	n	and Am	Added	to Fees	-
	9. Name and Addre	ss of Current I	Registered #	\gent	. 81	Name		10. Name and	d Address o	r New Regist	erea Age	ent	·	1
	·			; ["		ان	111 6	<u>rres</u>	<u> </u>				1	
SOTO, ELIZABETH			82 Street Addre					fress (P.O. Box Number is Not Acceptable) WCNONAN Place						
	ONAH PLACE			83		LL	VOCKLOK	iar i	- 10 CC	_			1	
#12					_=	 	13						_	
WEST-PAL	LM-BEACH-FL-33405				84	-City	00	Talm	Pen	<u> </u>	FI .		Code	: -
11. Dureuant	to the provisions of Sect	ions 617 0502 :	and 617 150	3 Florida Statutes	the above	y د د ا		ation aubmita ti	hic statemen	for the numo	se of cha	anging its	registered	1.
office or re	to the provisions of Sect egistered agent, or both m familiar with, and acc	in the State of	Florida. Suc	h change was auth	orized by	the corpo	oration	's board of dire	ctors. I herel	y accept the	appointm	ent as re	gistered	
	m ramiliar with, and acci		is or, sectio	11617.0503, Tiolida	Gre		1	\mathcal{L}		4-10) . gc	3		
SIGNATURE Signature, typed or printed name of registered agent a							equired v	vhen reinstating)		DA	TĒ			Ŕ
12.	0	FFICERS AND	DIRECTOR		13.			ADDITIONS	S/CHANGES	TO OFFICER				11/08
TITLE	D .			DELETE	1.1 TITLE		\Box	3 .			•	Chango	Addition	1 -
NAME	SOTO, ELIZABETH		1.2 NAME			Ko	velo, Weno	inar	lai ce	412		•	F037	
STREET ADDRESS						TADORESS	100	st Palm	. Doc) - 1 -		200		<u>ا</u> ۲
CITY-ST-ZIP	WEST PALM BEACH	1 FL 33405	<u>. </u>	☐ DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP	VVE	ST IZUIV	1 Belle	и, рс		Change	Addition	5
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NAME STREET ADDRESS		ICE #13				T ADDRESS			•		•			
	311 WENONAH PLACE., #13 WEST PALM BEACH FL 33405				2.4 CTY-5					•				
CITY-ST-ZIP	D .	1 1 2 00700		DELETE	3.1 TITLE		-				8	Change	Addition]
NAME	DAWSON, BETHAN	ΥV	-		3.2 NAME						٠.		,	
STREET ADDRESS	4991 SABAL PINE (903-D2		3.3 STREE	TADDRESS		17 Spru						
CITY-ST-ZIP	WEST PALM BEACH				3.4. CITY-S	ST-ZIP 1	Ma	nchest	erin	14 05]
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11714	1		1		_						_			1

6.4 CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS

STREET ADDRESS