

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47542

FILED
Jan 09, 2009
Secretary of State

Entity Name: WEDGEWOOD III PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2005 CAPTIVA CT
SUN CITY CENTER, FL 33573 US

New Principal Place of Business:

Current Mailing Address:

2005 CAPTIVA CT
SUN CITY CENTER, FL 33573 US

New Mailing Address:

FEI Number: 59-3124193

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINES, JAMES
315 S. HYDE PARK AVE.
TAMPA, FL 33606 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: PD () Delete
Name: STRIEPER, GERARD
Address: 2005 CAPTIA COURT
City-St-Zip: SUN CITY CENTER, FL 33573

Title: SD () Delete
Name: PERKINS, BRENDA
Address: 2004 CAPTIVA CT
City-St-Zip: SUN CITY CENTER, FL 33573

Title: TD () Delete
Name: SULZBERGER, ROLF
Address: 2221 WESTMINSTER MANOR LANE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VD () Delete
Name: NIEMCZYK, HENRY
Address: 2233 NEW BEOFORD DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GERARD E. STRIEPER

PRES

01/09/2009

Electronic Signature of Signing Officer or Director

Date