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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 24 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N48867** **(8)**

1. Corporation Name

WILDWOOD ESTATES RESIDENTS CLUB, INC.

Principal Place of Business	Mailing Address
5586 COLUMBUS CIR WILDWOOD FL 34785 US	5586 COLUMBUS CIR WILDWOOD FL 34785 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/14/1992
3a. Date of Last Report: 02/14/1994
4. FEI Number: 59-3093704 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 5452 Herttage blvd.	26 5452 Heritage Blv.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Wildwopd Fl.	28 Wildwood, F/
24 Zip 34785 25 Country U.S.A.	29 Zip 34785 30 Country U.S.A.

9. Name and Address of Current Registered Agent

REYNOLDS, JOSEPH
5586 COLUMBUS CIRCLE
WILDWOOD FL 34785

10. Name and Address of New Registered Agent

81 Name: John Schneider
82 Street Address (P.O. Box Number is Not Acceptable): 5452 Heritage Blvd.
83 Wildwood, Fl.
84 City: FL 85 Zip Code: 34785

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: John Schneider President John Schneider 4-17-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	☒ Change ☐ Addition
NAME	REYNOLDS, JOSEPH	12 NAME	Schneider, John	
STREET ADDRESS	5586 COLUMBUS CIRCLE	13 STREET ADDRESS	5452 Heritage Blvd.	
CITY-ST-ZIP	WILDWOOD FL	14 CITY-ST-ZIP	Wildwood, Fl. 34785	
TITLE	VD	21 TITLE	VD	☒ Change ☐ Addition
NAME	SCHNEIDER, JACK	22 NAME	Meyer, Fred	
STREET ADDRESS	5452 HERITAGE BLVD.	23 STREET ADDRESS	5252 Oxford Court	
CITY-ST-ZIP	WILDWOOD FL	24 CITY-ST-ZIP	Wildwood, Fl. 34785	
TITLE	SD	31 TITLE	SD	☒ Change ☐ Addition
NAME	ELDOT, JOAN	32 NAME	Spengler, Virginia	
STREET ADDRESS	5255 CAMBRIDGE COURT	33 STREET ADDRESS	5438 Heritage Blvd.	
CITY-ST-ZIP	WILDWOOD FL	34 CITY-ST-ZIP	Wildwood, Fl. 34785	
TITLE	TD	41 TITLE	TD	☒ Change ☐ Addition
NAME	KURUKIAN, GEORGETTE	42 NAME	Costas, Mildred	
STREET ADDRESS	5499 HERITAGE BLVD.	43 STREET ADDRESS	5500 Heritage Blvd.	
CITY-ST-ZIP	WILDWOOD FL	44 CITY-ST-ZIP	Wildwood, Fl. 34785	
TITLE	D	51 TITLE	D	☒ Change ☐ Addition
NAME	COSTA, MILLIE	52 NAME	Abraham, William	
STREET ADDRESS	5500 HERITAGE BLVD.	53 STREET ADDRESS	5210 Liberty Court	
CITY-ST-ZIP	WILDWOOD FL	54 CITY-ST-ZIP	Wildwood, Fl. 34785	
TITLE	D	61 TITLE	D	☒ Change ☐ Addition
NAME	HILL, FRANK	62 NAME	Schneider, Frances	
STREET ADDRESS	5255 OXFORD CT	63 STREET ADDRESS	5168 Cambridge Court	
CITY-ST-ZIP	WILDWOOD FL	64 CITY-ST-ZIP	Wildwood, Fl. 34785	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: John Schneider John Schneider 4/16/95 (904) 748-5139
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000867