

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 01, 2009  
Secretary of State**

DOCUMENT# N49481

Entity Name: CAROL WOOD HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

37139 SHALIMAR DR  
FRUITLAND PARK, FL 34731 US

**New Principal Place of Business:**

**Current Mailing Address:**

37139 SHALIMAR DR  
FRUITLAND PARK, FL 34731 US

**New Mailing Address:**

FEI Number: 59-3182079      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JOHNSON, CHARLES D.  
907 WEBSTER STREET  
LEESBURG, FL 34748 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 ( ) Delete  
Name: FEDOR, ROBERT J OWNER  
Address: 37139 SHALIMAR DRIVE  
City-St-Zip: FRUITLAND PARK, FL 34731 US

Title: D ( ) Delete  
Name: FEDOR, CAROL J.,  
Address: 37139 SHALIMAR DRIVE  
City-St-Zip: FRUITLAND PARK, FL 34731 US

Title: D ( ) Delete  
Name: HARPER, RICKY F  
Address: 36526 TRIPP COURT  
City-St-Zip: FRUITLAND PARK, FL 34731 US

**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:

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: ROBERT J FEDOR

OWNR

02/01/2009

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

\_\_\_\_\_  
Date