

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000482

FILED
May 21, 2007
Secretary of State

Entity Name: WOLDUNN COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

470 WOLDUNN CIRCLE
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

470 WOLDUNN CIRCLE
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 59-3203038 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

REISCHMANN, WILLIAM
1001 HEATHROW PARK LANE
SUITE 4001
LAKE MARY, FL 32746 US

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: VP () Delete
Name: CONLEY, HAMPTON
Address: 494 WOLDUNN CIRCLE
City-St-Zip: LAKE MARY, FL 32746

Title: SD () Delete
Name: HEIMERL, MIKE
Address: 477 WOLDUNN CIR.
City-St-Zip: LAKE MARY, FL 32746

Title: VD () Delete
Name: SPARKS, DONALD E
Address: 397 WOLDUNN CIR.
City-St-Zip: LAKE MARY, FL 32746

Title: PD () Delete
Name: LORD, JAMES
Address: 303 OLD DUNN CT.
City-St-Zip: LAKE MARY, FL 32746

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: DONALD E SPARKS

VD

05/21/2007

Electronic Signature of Signing Officer or Director

Date