# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000000560

FILED Mar 30, 2009 Secretary of State

Entity Name: WEKIWA WOODS SUBDIVISION HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

860 NORTH S.R. 434 **SUITE 1009** 

ALTAMONTE SPRINGS, FL 32714 US

**New Mailing Address: Current Mailing Address:** 

860 NORTH S.R. 434 **SUITE 1009** 

ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-3179233 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CAMPBELL, MARILYN 860 NORTH S.R. 434 **SUITE 1009** 

ALTAMONTE SPRINGS, FL 32714 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:

City-St-Zip:

City-St-Zip:

City-St-Zip:

1218 SABLEWOOD DRIVE

APOPKA, FL 32712

### Electronic Signature of Registered Agent

### Date

#### **OFFICERS AND DIRECTORS:**

APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

APOPKA, FL 32712 US

(X) Change ( ) Addition

() Delete MALOY, JIM STARCHER, TERESA D Name: Name: 1230 SABLEWOOD DR. Address: 1218 SABLEWOOD DR. Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 US

Title: () Delete Title: (X) Change ( ) Addition CONROY, FRANK Name: OWENS, ALEXANDER G Name: Address: 1370 CROWN ISLE CR Address: 1143 CROWN ISLE CIRCLE

Title: () Delete Title: (X) Change ( ) Addition CARCARA, JACK CARCARA, JACK Name: Name:

726 PARADISE ISLE 726 PARADISE ISLE Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 US

( ) Delete (X) Change ( ) Addition Title: Title:

Name: LEE, DONALD Name: LEE, DONALD 1232 CROWN ISLE CR 1232 CROWN ISLE CR Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 US

Title: ( ) Delete Title: (X) Change ( ) Addition LUETKEMEYER, SHELLEY LUETKEMEYER, SHELLEY Name: Name: 1322 CROWN ISLE CT 1322 CROWN ISLE CT Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: APOPKA, FL 32712 US

Title: () Delete Title: ( ) Change (X) Addition RUSSELL, MIRIAM A MGR Name: Name: Address: Address: 860 NORTH S.R. 434, SUITE 1009 ALTAMONTE SPRINGS, FL 32714 US

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.

City-St-Zip:

SIGNATURE: MIRIAM A. RUSSELL MGR 03/30/2009