2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006043

FILED Jan 27, 2009 Secretary of State

Entity Name: WEDGEWOOD VILLAGE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 5980 WINETON TRAILS BLVD 5980 WINSTON TRAILS BLVD. LAKE WORTH, FL 33463 LAKE WORTH, FL 33463 **Current Mailing Address: New Mailing Address:** 5980 WINETON TRAILS BLVD LAKE WORTH, FL 33463 US FEI Number: 65-0681385 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: SKRLD, INC 201 ALHAMBRA CIRCLE STE 1102 MIAMI, FL 33131 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BASTIEN, BRADLEY Name: Name: 6080 WEDGEWOOD VILLAGE CIR Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: Title: () Delete Title: (X) Change () Addition WOLF, GREGORY Name: WOLF, GREGORY Name: Address: 5935 WEDGEWOOD VILLAGE CIR Address: 5935 WEDGEWOOD VILLAGE CIR City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: LAKE WORTH, FL 33463 Title: () Delete Title: () Change () Addition MOMPER, CAROLINE Name: Name: 5978 WEDGEWOOD VILLAGE CI Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: Title: VΡ () Delete Title: (X) Change () Addition Name: FRANCIS, AL Name: STEWART, JAMES 5923 WEDGEWOOD VILLAGE CIR 5995 WEDGEWOOD VILLAGE CIR Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: LAKE WORTH, FL 33463 Title: () Delete Title: () Change (X) Addition HANNAN, BRUCE Name: Name: 5918 WEDGEWOOD VILLAGE CIRCLE Address: Address: LAKE WORTH, FL 33463 City-St-Zip: 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: BRADLEY BASTIEN P 01/27/2009