

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004831

FILED
Mar 25, 2008
Secretary of State

Entity Name: WHEELER CORNERS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 W SR 434
STE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

1490 SWANSON DRIVE
SUITE 200
OVIEDO, FL 32765 US

Current Mailing Address:

2180 W SR 434
STE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

1490 SWANSON DRIVE
SUITE 200
OVIEDO, FL 32765 US

FEI Number: 59-3544530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART JR, JAMES W
SENTRY, MANAGEMENT INC
2180W SR 434 STE 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

BURGUNDER, KARL A
1490 SWANSON DRIVE
SUITE 200
OVIEDO, FL 32765 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: KARL A. BURGUNDER

03/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BURGUNDU, KARL A
Address: 1490 SWANSON DR #200
City-St-Zip: OVIEDO, FL 32765

Title: VPD () Delete
Name: CRAIG, MICHAEL S
Address: PO BOX 621081
City-St-Zip: OVIEDO, FL 32765

Title: STD () Delete
Name: MIRIAM, BRUCE
Address: PO BOX 621081
City-St-Zip: OVIEDO, FL 32765

Title: D (X) Delete
Name: GIBSON, PHILIP
Address: 411 AUGUSTINE CT
City-St-Zip: OVEIDO, FL 32762

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: BURGUNDER, KARL A
Address: 1490 SWANSON DR., SUITE 200
City-St-Zip: OVIEDO, FL 32765

Title: SAT (X) Change () Addition
Name: CRAIG, MICHAEL S
Address: 1030 SHANGRI LA LANE
City-St-Zip: OVIEDO, FL 32765

Title: VASD (X) Change () Addition
Name: GIBSON, PHILIP A
Address: 600 LEGACY PARK DR.
City-St-Zip: CASSELBERRY, FL 32707

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: KARL A. BURGUNDER

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03/25/2008

Electronic Signature of Signing Officer or Director

Date