2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2004 8:00 am
Secretary of State
07-16-2004 90007 007 ****61.25

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1. Entity Name
HERNDON WOODS PROPERTY OWNERS ASSOCIATION, INC.

54062693

Principal Place of Business	Mailing Address
4960 HERNDON DRIVE AUBURNDALE, FL 33823	4960 HERNDON DRIVE AUBURNDALE, FL 33823

07072004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
4905 HERNDON DR.	4905 HERNDON DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: AUBURNDALE, FL	City & State: AUBURNDALE FLORIDA
Zip: 33823-9108 Country: USA	Zip: 33823-9108 Country: USA

4. FEI Number: 59-3454675 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MEADOWS, CARMEN 4960 HERNDON DRIVE AUBURNDALE, FL 33823	Name: CLEM T. COLLIER Street Address (P.O. Box Number is Not Acceptable): 4905 HERNDON DRIVE City: AUBURNDALE FL Zip Code: 33823-9108

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Clem T. Collier CLEM T. COLLIER 7-7-04
(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	☒ Delete	TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	MEADOWS, CARMEN		NAME	CLEM T. COLLIER	
STREET ADDRESS	4960 HERNDON DR.		STREET ADDRESS	4905 HERNDON DR	
CITY-ST-ZIP	AUBURNDALE, FL 33823		CITY-ST-ZIP	AUBURNDALE, FL 33823-9108	
TITLE	V	☒ Delete	TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	JONES, STEVEN		NAME	JOSE N AGUILERA	
STREET ADDRESS	4804 HERNDON DRIVE		STREET ADDRESS	4941 HERNDON WAY	
CITY-ST-ZIP	AUBURNDALE, FL 33823		CITY-ST-ZIP	AUBURNDALE, FL. 33823.	
TITLE	S	☒ Delete	TITLE	SECRETARY	☒ Change ☐ Addition
NAME	BRIDENTIAL, CHRIS		NAME	CLAUDE A PERKINS	
STREET ADDRESS	4820 HERNDON WAY		STREET ADDRESS	4920 HERNDON WAY	
CITY-ST-ZIP	AUBURNDALE, FL 33823		CITY-ST-ZIP	AUBURNDALE, FL 33823	
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	TAYLOR, NORMAN		NAME		
STREET ADDRESS	4910, HERNDON WAY		STREET ADDRESS		
CITY-ST-ZIP	AUBURNDALE, FL 33823		CITY-ST-ZIP		
TITLE	D	☒ Delete	TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	WHITTEN, JIMMY		NAME	HAROLD A BROKAW	
STREET ADDRESS	1416 OLD DIXIE HIGHWAY		STREET ADDRESS	4912 HERNDON DRIVE	
CITY-ST-ZIP	AUBURNDALE, FL 33823		CITY-ST-ZIP	AUBURNDALE, FL 33823	
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	SPURGEON, ROY		NAME		
STREET ADDRESS	4922 HERNDON DRIVE		STREET ADDRESS		
CITY-ST-ZIP	AUBURNDALE, FL 33823		CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Clem T. Collier 7-7-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #