

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2008 8:00 am
Secretary of State

03-27-2008 90039 023 ****61.25

DOCUMENT # N97000003789

1. Entity Name

**CARRIAGE HOMES AT WOODS EDGE CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business

**C/O MELDON CONSULTANTS
4949 TAMiami TR NORTH 201
NAPLES FL 34103-3017**

Mailing Address

**C/O MELDON CONSULTANTS
4949 TAMiami TR NORTH 201
NAPLES FL 34103-3017**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-3476594

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

**MOORE, WILLIAM S
C/O MELDON CONSULTANTS
4949 TAMiami TR NORTH #201
NAPLES FL 34103-3017**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

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
NAME
STREET ADDRESS
CITY- ST- ZIP
**DV
MASON, BIRNY
28611 CARRIAGE HOMES DR. #101
BONITA SPRINGS FL 34134** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
28610 Carriage Homes Dr #101 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**DP
MINER, BARRY
28611 CARRIAGE HOMES DR. #104
BONITA SPRINGS FL 34134** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
28631 Carriage Homes Dr #102 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**DS
HARTUNG, ROD
28611 CARRIAGE HOMES DR. #102
BONITA SPRINGS FL 34134** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
28620 Carriage Homes Dr #104 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**D
KING, RICHARD
28611 CARRIAGE HOMES DR. #104
BONITA SPRINGS FL 34134** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**DT
STOKES, KAREN
28630 CARRIAGE HOMES DR #102
BONITA SPRINGS FL 34134** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**DT
STOKES, KAREN
28630 CARRIAGE HOMES DR #102
BONITA SPRINGS FL 34134** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**BT
Hynes, Carol A.
28640 Carriage Homes Dr # 202
Bonita Springs, FL 34134** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**DT
STOKES, KAREN
28630 CARRIAGE HOMES DR #102
BONITA SPRINGS FL 34134** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**BT
Hynes, Carol A.
28640 Carriage Homes Dr # 202
Bonita Springs, FL 34134** ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Carol A. Hynes Carol A. Hynes 3-18-08 239-494-8479