

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005666

FILED
Jan 22, 2008
Secretary of State

Entity Name: WILDER TRACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1507 S. ALEXANDER ST.
SUITE 103
PLANT CITY, FL 33563

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3566
PLANT CITY, FL 33563

New Mailing Address:

FEI Number: 59-3518229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROFESSIONAL PROPERTY MGMT, SVC.
1507 S. ALEXANDER ST. SUITE 103
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: FAULKNER, PAUL
Address: 2710 WILDER TRACE COURT
City-St-Zip: PLANT CITY, FL 33566

Title: TSD () Delete
Name: REEL, RAYMOND
Address: 2713 WILDER TRACE CT.
City-St-Zip: PLANT CITY, FL 33566

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FAULKNER, PAUL
Address: 2710 WILDER TRACE COURT
City-St-Zip: PLANT CITY, FL 33566 US

Title: TREA (X) Change () Addition
Name: CARDWELL, DORINDA
Address: 2728 WILDER TRACE CT.
City-St-Zip: PLANT CITY, FL 33566 US

Title: VP () Change (X) Addition
Name: SLOAN, BILLY
Address: 2707 WILDER TRACE CT.
City-St-Zip: PLANT CITY, FL 33566 US

Title: SEC () Change (X) Addition
Name: DITTUS, TERRY
Address: 2726 WILDER TRACE CT
City-St-Zip: PLANT CITY, FL 33566 US

Title: DIR () Change (X) Addition
Name: KEEL, RAYMOND
Address: 2713 WILDER TRACE CT
City-St-Zip: PLANT CITY, FL 33566 US

Title: DIR () Change (X) Addition
Name: ESPINOSA, ENID
Address: 2711 WILDER TRACE CT
City-St-Zip: PLANT CITY, FL 33566 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.

SIGNATURE: GAIL CALHOUN MCGRATH

MGR

01/22/2008

Electronic Signature of Signing Officer or Director

Date