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Oct 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # N97000007047 (0)

1. Corporation Name

WOODBORNE TERRACE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

3637 4TH STREET NORTH
SUITE 230
ST. PETERSBURG FL 33704

3637 4TH STREET NORTH
SUITE 230
ST. PETERSBURG FL 33704

3. Date Incorporated or Qualified

12/18/1997

4. FEI Number

☒ Applied For
☐ Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 **REALTY MANAGEMENT, INC**

26 **REALTY MANAGEMENT INC**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **PO BOX 21839**

27 **PO BOX 21839**

City & State

City & State

23 **MILWAUKEE WI**

28 **MILWAUKEE WI**

Zip

Country

Zip

Country

24 **53221**

25 **USA**

29 **53221**

30 **USA**

6. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, WALTER E
1301 FOURTH STREET NORTH
ST. PETERSBURG FL 33701

81 Name

L. JOHN GUERIN, JR.

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

1042 MAIN STREET

83

84 City

DUNEDIN

FL

85 Zip Code

34698

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

L. JOHN GUERIN, JR

4-29-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **STP** ☒ DELETE

NAME **BODZIAK, JOHN C**
STREET ADDRESS **3637 4TH STREET NORTH STE. 230**
CITY-ST-ZIP **ST. PETERSBURG FL 33704**

1.1 TITLE **AD PRESIDENTS** ☒ Change ☒ Addition

1.2 NAME **ROBERT O. SCHRYTTER**
1.3 STREET ADDRESS **PO BOX 21839 N/A**
1.4 CITY-ST-ZIP **MILWAUKEE WI 53221**

TITLE **D** ☒ DELETE

NAME **BODZIAK, JACK C**
STREET ADDRESS **3637 4TH STREET NORTH STE. 230**
CITY-ST-ZIP **ST. PETERSBURG FL 33704**

2.1 TITLE **DIRECTOR** ☐ Change ☒ Addition

2.2 NAME **L. JOHN GUERIN, JR.**
2.3 STREET ADDRESS **1042 MAIN STREET**
2.4 CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE **D** ☒ DELETE

NAME **BODZIAK, JOHN A JR.**
STREET ADDRESS **3637 4TH STREET NORTH STE. 230**
CITY-ST-ZIP **ST. PETERSBURG FL 33704**

3.1 TITLE **ROBERT O. SCHRYTTER** ☐ Change ☐ Addition

3.2 NAME **P.O. BOX 21839 N/A**
3.3 STREET ADDRESS **DIRECTOR**
3.4 CITY-ST-ZIP **MILWAUKEE, WI 53221**

TITLE **D** ☒ DELETE

NAME **ALLES, KEN**
STREET ADDRESS **3637 4TH STREET NORTH STE. 230**
CITY-ST-ZIP **ST. PETERSBURG FL 33704**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

L. JOHN GUERIN, JR

4/29/98

813-797-2343

CR2E037 (10/97)