


FILE NOW: FILING FEE IS \$61.25

FILED
Feb 20, 1999 8:00 am
Secretary of State

02-20-1999 90104 045 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N97000007047					
1. Corporation Name WOODBORNE TERRACE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business REALTY MANAGEMENT, INC. P.O. BOX 21839 MILWAUKEE WI 53221			Mailing Address REALTY MANAGEMENT, INC. P.O. BOX 21839 MILWAUKEE WI 53221		



* 8 84937 90104 3 45 7 *

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/18/1997	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number APPLIED FOR	
22 City & State		27 City & State		Applied For Not Applicable	
23 Zip		28 Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		29		Trust Fund Contribution	

9. Name and Address of Current Registered Agent GUERIN, JOHN L JR 1042 MAIN STREET DUNEDIN FL 34698				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83				84 City	
				85 Zip Code FL	

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

Signature of registered agent or registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-8-99

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE	PO SCRYTTER, ROBERT O			1.1 TITLE			
NAME	P.O. BOX 21839 N/A			1.2 NAME			
STREET ADDRESS	MILWAUKEE WI 53221			1.3 STREET ADDRESS			
CITY-ST-ZIP				1.4 CITY-ST-ZIP			
TITLE	D			2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GUEERIN, JOHN L JR			2.2 NAME			
STREET ADDRESS	1042 MAIN STREET			2.3 STREET ADDRESS			
CITY-ST-ZIP	DUNEDIN FL 34698			2.4 CITY-ST-ZIP			
TITLE	D			3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SGHLYTTER, ROBERT G			3.2 NAME			
STREET ADDRESS	P.O. BOX 21839 N/A			3.3 STREET ADDRESS			
CITY-ST-ZIP	MILWAUKEE WI 53221			3.4 CITY-ST-ZIP			
TITLE	<input type="checkbox"/> DELETE			4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE	<input type="checkbox"/> DELETE			5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE	<input type="checkbox"/> DELETE			6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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, with all other like empowered.

SIGNATURE: **2-8-99** **727-738-5566**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)