# **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011174

Entity Name: WILD ACRES HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 25, 2013
Secretary of State
CC5141023028

## **Current Principal Place of Business:**

617 W. UNIVERSITY AVE. DELAND, FL 32720

### **Current Mailing Address:**

617 W. UNIVERSITY AVE. DELAND, FL 32720

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

STALLARD, RANDY 617 W. UNIVERSITY AV. DELAND, FL 32720 US

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

#### Officer/Director Detail:

Title PD Title STD

Name STALLARD, RANDY Name WAYNE, BEAL

Address 617 W. UNIVERSITY AVE Address 6417 LAKE MEADOW DRIVE

City-State-Zip: DELAND FL 32720 City-State-Zip: BURKE VA 22015

Title VD

Name RUSSO, TOM

Address 617 W. UNIVERSITY AVE

City-State-Zip: DELAND FL 32720

I hereby 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 all other like empowered.

SIGNATURE: WAYNE E. BEAL

SECRETARY/TREASURER 01/25/2013

Electronic Signature of Signing Officer/Director Detail

Date