

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 248119

FILED
Apr 27, 2011
Secretary of State

Entity Name: WOODCREST TERRACE APARTMENTS INC

Current Principal Place of Business:

615 SOUTH RIVERSIDE DRIVE
APT 9
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

615 SOUTH RIVERSIDE DRIVE
APT 9
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 59-1454410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAPP, PATRICIA M T
615 S RIVERSIDE DR
APT 9
POMPANO BCH, FL 33062 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: T
Name: RAPP, PATRICIA M T
Address: 615 S RIVERSIDE DR, APT 9
City-St-Zip: POMPANO BCH, FL 33062 US

Title: P
Name: KING, CONNIE S P
Address: 2608--1 NORTH OCEAN BLVD.
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: S
Name: VERSE, SELMA S
Address: 5081 SE BURNING TREE CIRCLE
City-St-Zip: STUART, FL 34997 US

Title: V
Name: EPIFANIO, JOHN V
Address: 5610 S. TRAVELERS PALM LANE
City-St-Zip: TAMARAC, FL 33319 US

Title: D
Name: DUNN, AMY D
Address: 9327 AVIANO DRIVE
City-St-Zip: FORT MYERS, FL 33913 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICIA M. RAPP

T

04/27/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date