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Feb 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **729670** **(0)**

1. Corporation Name

ASSOCIATION OF WOODSIDE VILLAGE EAST, INC.

Principal Place of Business	Mailing Address
16 CHURCH STLAGE EAST IN OSPREY FL 34229 US	16 CHURCH ST OSPREY FL 34229-9349 US

3. Date Incorporated or Qualified: 05/15/1974
3a. Date of Last Report: 04/17/1996

2. Principal Place of Business	2a. Mailing Address
21 2100 CONSTITUTION	26 2100 CONSTITUTION
22 Suite, Apt. #, etc. #110	27 Suite, Apt. #, etc. #110
23 City & State SARASOTA FL	28 City & State SARASOTA FL
24 Zip 34231 25 Country USA	29 Zip 34231 30 Country USA

4. FEI Number: 59-1555345 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LIGHTHOUSE MANAGEMENT AND REALTY 16 CHURCH ST OSPREY FL 34229	81 Name: ARGUS PROPERTY MANAGEMENT 82 Street Address (P.O. Box Number is Not Acceptable): 2100 CONSTITUTION BL- #110 83 84 City: SARASOTA FL 85 Zip Code: 34231

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] LARRY V ASARCH PROP MGR 2-11-97
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 / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE			☐ Change ☐ Addition
TITLE	P		1.1 TITLE	PD	
NAME	FLAGG, EVELYN		1.2 NAME		
STREET ADDRESS	2210 CIRCLEWOOD DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	2.1 TITLE	SD	☐ Change ☐ Addition
NAME	BARNES, PATRICIA		2.2 NAME		
STREET ADDRESS	6950 WOODWIND DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	3.1 TITLE	TD	☐ Change ☐ Addition
NAME	OHARA, RUSSELL		3.2 NAME		
STREET ADDRESS	2209 CIRCLEWOOD DR		3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	ABATE, PASQUALE		4.2 NAME		
STREET ADDRESS	45 ROCK AVENUE		4.3 STREET ADDRESS		
CITY-ST-ZIP	WATCHING NJ		4.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	5.1 TITLE	VPD	☒ Change ☒ Addition
NAME	BROWN, FRANK		5.2 NAME	SALLY ROSEN	
STREET ADDRESS	2211 CIRCLEWOOD DR		5.3 STREET ADDRESS	6930 WOODWIND	
CITY-ST-ZIP	SARASOTA FL		5.4 CITY-ST-ZIP	SARASOTA FL 34231	
TITLE	AS	☒ DELETE	6.1 TITLE	AS	☒ Change ☒ Addition
NAME	KEITH, LLOYD		6.2 NAME	LARRY ASARCH	
STREET ADDRESS	830 S TAMIAMI TR		6.3 STREET ADDRESS	2100 CONSTITUTION	
CITY-ST-ZIP	OSPREY FL		6.4 CITY-ST-ZIP	SARASOTA FL 34231	

CR2E037 (9/96)

14. I do 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: [signature] LARRY V ASARCH 1-23-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0062699