

FILE NOW; FILING FEE IS \$61.25

FILED

Jan 28, 1999 8:00am
Secretary of State

01-28-1999 90063 023 *****61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 739878

1. Corporation Name
WOODBURY IMPROVEMENT ASSOCIATION, INC.

Principal Place of Business

WOODBURY ROAD
P.O. BOX 2301
BOCA RATON FL 33427-9301

Mailing Address

WOODBURY ROAD
P.O. BOX 2301
BOCA RATON FL 33427-9301



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

08/10/1977

4. FEI Number

59-1934611

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MCDERMOTT, PAUL
6354 WOODBURY RD
BOCA RATON FL 33433

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD
NAME MCDERMOTT, PAUL
STREET ADDRESS 6354 WOODBURY RD.
CITY-ST-ZIP BOCA RATON FL 33433

TITLE TD
NAME SEDGWICK, MICHAEL
STREET ADDRESS 6414 WOODBURY RD.
CITY-ST-ZIP BOCA RATON FL

TITLE SD
NAME KLIENBERG, ELLIOTT
STREET ADDRESS 6173 WOODBURY RD.
CITY-ST-ZIP BOCA RATON FL

TITLE D
NAME WILDERMAN, JOHN
STREET ADDRESS 6137 WOODBURY RD.
CITY-ST-ZIP BOCA RATON FL

TITLE VD
NAME WRIGHT, GORDON
STREET ADDRESS 6450 WOODBURY RD.
CITY-ST-ZIP BOCA RATON FL 33433

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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, with all other like empowered.

SIGNATURE: MICHAEL SEDGWICK 1-5-99 561 391 3551

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)