

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739878

FILED
Apr 12, 2005
Secretary of State

Entity Name: WOODBURY IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

WOODBURY ROAD
P.O. BOX 2301
BOCA RATON, FL 334272301

New Principal Place of Business:

Current Mailing Address:

WOODBURY ROAD
P.O. BOX 2301
BOCA RATON, FL 334272301

New Mailing Address:

FEI Number: 59-1934611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDERMOTT, PAUL
6354 WOODBURY RD
BOCA RATON, FL 33433 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: D () Delete
Name: MCDERMOTT, PAUL
Address: 6354 WOODBURY RD.
City-St-Zip: BOCA RATON, FL 33433 US

Title: TD () Delete
Name: CZARNECKI, STANLEY J
Address: 6125 WOODBURY RD.
City-St-Zip: BOCA RATON, FL 33433 US

Title: SD () Delete
Name: KLIENBERG, ELLIOTT
Address: 6173 WOODBURY RD.
City-St-Zip: BOCA RATON, FL 33433 US

Title: VD () Delete
Name: CARNEY, WILBUR
Address: 6149 WOODBURY RD.
City-St-Zip: BOCA RATON, FL 33433

Title: PD () Delete
Name: RUSSO, STEVE
Address: 6329 WOODBURY RD
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: MCDERMOTT, PAUL
Address: 6354 WOODBURY RD.
City-St-Zip: BOCA RATON, FL 33433 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: TOLCES, DAVID
Address: 6198 WOODBURY RD.
City-St-Zip: BOCA RATON, FL 33433

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STANLEY CZARNECKI

TD

04/12/2005

Electronic Signature of Signing Officer or Director

Date