


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90196 005 ****61.25

DOCUMENT # 747554 1. Entity Name THE VILLAGE OF WOODBRIDGE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business C/O HAWK-EYE MANAGEMENT 3901 N FEDERAL HWY STE 202 BOCA RATON, FL 33431			Mailing Address C/O HAWK-EYE MANAGEMENT 3901 N FEDERAL HWY STE 202 BOCA RATON, FL 33431		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-2169117				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HAWK-EYE MANAGEMENT INC 3901 N FEDERAL HIGHWAY STE 202 BOCA RATON, FL 33431			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering)					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D		TITLE	Pres. Martin Bolnick	
NAME	SCHWARTZ, JAY		NAME	7161 Woodbridge Dr.	
STREET ADDRESS	7038 WOODBRIDGE CIR.		STREET ADDRESS	Boca Raton, FL. 33434	
CITY-ST-ZIP	BOCA RATON, FL 33434		CITY-ST-ZIP		
TITLE	VD		TITLE	VP. Howard Worobow	
NAME	SLATER, LEE		NAME	7079 Woodbridge Dr.	
STREET ADDRESS	7054 WOODBRIDGE CIR.		STREET ADDRESS	Boca Raton, FL. 33434	
CITY-ST-ZIP	BOCA RATON, FL 33434		CITY-ST-ZIP		
TITLE	TD		TITLE	Tres. Lee Slater	
NAME	BOLNICK, MARTIN		NAME	7054 Woodbridge Cir.	
STREET ADDRESS	7161 WOODBRIDGE CIR.		STREET ADDRESS	Boca Raton, FL. 33434	
CITY-ST-ZIP	BOCA RATON, FL 33434		CITY-ST-ZIP		
TITLE	D		TITLE	D, Mike Sneider	
NAME	WOROBOW, HOWARD		NAME	7004 Woodbridge Cir.	
STREET ADDRESS	7079 WOODBRIDGE CT		STREET ADDRESS	Boca Raton, FL. 33434	
CITY-ST-ZIP	BOCA RATON, FL 33431		CITY-ST-ZIP		
TITLE	D		TITLE	D, Joseph Kass	
NAME	WHITMAN, JUDY		NAME	7020 Woodbridge Cir.	
STREET ADDRESS	7145 WOODBRIDGE COURT		STREET ADDRESS	Boca Raton, FL. 33434	
CITY-ST-ZIP	BOCA RATON, FL 33434		CITY-ST-ZIP		
TITLE			TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: _____			Date: 4/18/07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		