

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752190

FILED  
Apr 06, 2009  
Secretary of State

**Entity Name:** THE WOODLANDS OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

P O BOX 6055  
STUART, FL 349976548

**New Principal Place of Business:**

5700 S E LAMAY DRIVE  
STUART, FL 349976548

**Current Mailing Address:**

P O BOX 6055  
STUART, FL 349976548

**New Mailing Address:**

**FEI Number:** 59-2427424

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROOKS, JAMES  
5619 SE LAMAY DR  
STUART, FL 34997 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: MOSS, MARTIN  
Address: 5684 SE LAMAY DR  
City-St-Zip: STUART, FL 34997

Title: VP ( ) Delete  
Name: BLANCHER, PATRICK  
Address: 5673 SOUTHEAST LAMAY DRIVE  
City-St-Zip: STUART, FL 34997

Title: S ( ) Delete  
Name: TILLMAN, EVE  
Address: 5665 SE LAMAY DR  
City-St-Zip: STUART, FL 34997

Title: T ( ) Delete  
Name: POGLITSCH, BARBARA R  
Address: 5622 SE LAMAY DR  
City-St-Zip: STUART, FL 349976548

Title: P ( ) Delete  
Name: COHEN, LAWRENCE  
Address: 5595 SOUTHEAST LAMAY DRIVE  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: BLANCHER, CYNTHIA  
Address: 5673 SE LAMAY DR  
City-St-Zip: STUART, FL 349976548

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S (X) Change ( ) Addition  
Name: PETERS, HENRY  
Address: 5592 SE LAMAY DR  
City-St-Zip: STUART, FL 34997

Title: D (X) Change ( ) Addition  
Name: BLANCHER, PATRICK  
Address: 5673 SOUTHEAST LAMAY DRIVE  
City-St-Zip: STUART, FL 34997

Title: VP (X) Change ( ) Addition  
Name: TILLMAN, EVE  
Address: 5665 SE LAMAY DR  
City-St-Zip: STUART, FL 34997

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

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

Title: D (X) Change ( ) Addition  
Name: SAMPLE, COLLEEN  
Address: 5587 SE LAMAY DR  
City-St-Zip: STUART, FL 349976548

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BARBARA R POGLITSCH

T

04/06/2009

Electronic Signature of Signing Officer or Director

Date