2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 16, 2005 8:00 am
Secretary of State
02-02-2005 90042 022 ****61.25

66005600

1st MOORE CR2E037 (10/04)

DOCUMENT # 753262

1. Entity Name

WOODCREST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1920 WOODCREST DR #18 WINTER PARK FL 32792-5444	1920 WOODCREST DR #18 WINTER PARK FL 32792-5444

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2066307 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CASH, SIDNEY G 1920 WOODCREST DR WINTER PARK FL 32792	Name Street Address (P.O. Box Number is Not Acceptable) 1920 Woodcrest Dr. #11 City Winter Park FL Zip Code 32792

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FAZIO, CHUCK 1920 WOODCREST DR #13 WINTER PARK FL 32792	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Trice, MaryBeth 1920 Woodcrest Dr. #18 Winter Park, FL 32792	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD FLEMING, LEE ANN 1920 WOODCREST DR., #5 WINTER PARK FL 32792	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Sake, Patricia 1920 Woodcrest Dr. #12 Winter Park, FL 32792	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FLEMING, LEE ANN 1920 WOODCREST DR., #5 WINTER PARK, FL 32792	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary/Treasurer OConnor, Yolanda 1920 Woodcrest Dr. #11 Winter Park, FL 32792	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 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: MaryBeth Trice MaryBeth Trice 3/8/05 407 629-5997
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #