

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759604

FILED
Mar 17, 2009
Secretary of State

Entity Name: WOODSIDE TERRACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ARGUS PROPERTY MANAMGEMENT INC
2477 STICKNEY POINT RD, #118A
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

ARGUS PROPERTY MANAMGEMENT INC
2477 STICKNEY POINT RD, #118A
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 59-2436622 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUS PROPERTY MANAGEMENT, INC.
2477 STICKNEY POINT RD STE 118A
SARASOTA, FL 34231 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: T () Delete
Name: GRIFFITH, TED
Address: 7175 WOODCREEK DR #6
City-St-Zip: SARASOTA, FL 34231

Title: S () Delete
Name: BENNETT, ELIZABETH
Address: 7243 WOOD CREEK DR., #28
City-St-Zip: SARASOTA, FL 34231

Title: P () Delete
Name: WESTHEIMER, CAROL
Address: 7197 WOOD CREEK DRIVE, # 14
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: GUIDUCCI, WILLIAM
Address: 7166 WOOD CREEK DR 41
City-St-Zip: SARASOTA, FL 34231

Title: VPC () Delete
Name: SHERMAN, JOAN
Address: 7143 WOOD CREEK DR #203
City-St-Zip: SARASOTA, FL 342432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: D'ANNUNZIO, ELIZABETH
Address: 7164 WOOD CREEK DR., #42
City-St-Zip: SARASOTA, FL 34231

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

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

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

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: CAROL WESTHEIMER

PRES

03/17/2009

Electronic Signature of Signing Officer or Director

_____ Date