

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003125

FILED
Apr 01, 2009
Secretary of State

Entity Name: TRADITIONS AT WOODMONT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

550 N REO STREET
SUITE 300
TAMPA, FL 33609

New Principal Place of Business:

4902 EISENHOWER BLVD
SUITE 216
TAMPA, FL 33634

Current Mailing Address:

550 N REO STREET
SUITE 300
TAMPA, FL 33609

New Mailing Address:

4902 EISENHOWER BLVD
SUITE 216
TAMPA, FL 33634

FEI Number: 20-1353467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REALMANAGE LLC
550 N REO STREET
SUITE 300
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

MYERS, WADE
4902 EISENHOWER BLVD
SUITE 216
TAMPA, FL 33634 US

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: WADE MYERS

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MILLER, THOMAS
Address: 6303 SEA LAVENDER LANE
City-St-Zip: TAMPA, FL 33625

Title: VP () Delete
Name: DE JESUS, ELIS JAMES
Address: 6411 SEA LAVENDER LANE
City-St-Zip: TAMPA, FL 33625

Title: TD () Delete
Name: STROMSNES, TREVOR
Address: 13303 TIGER LILLY LANE
City-St-Zip: TAMPA, FL 33625

Title: SD (X) Delete
Name: FLEISCHMANN, ADAM
Address: 6305 SEA LAVENDER LANE
City-St-Zip: TAMPA, FL 33625

Title: D (X) Delete
Name: SKINNER, JACOB W
Address: 13312 TIGER LILLY LANE
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: SKINNER, JACOB
Address: 13312 TIGER LILLY LANE
City-St-Zip: TAMPA, FL 33625

Title: SD (X) Change () Addition
Name: COOK, GARY
Address: 13307 TIGER LILLY LANE
City-St-Zip: TAMPA, FL 33625

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: THOMAS MILLER

P

04/01/2009

Electronic Signature of Signing Officer or Director

Date