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Jan 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N05831 (5)

1. Corporation Name
WOODLAND ESTATES PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address
5910 STONEWOOD CT. 5910 STONEWOOD CT.
JUPITER FL 33458 JUPITER FL 33458-7834

3. Date Incorporated or Qualified 10/24/1984
3a. Date of Last Report 02/21/1996

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

4. FEI Number NOT APPLICABLE
Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ST. JOHN, DAVID
500 AUSTRALIAN AVE. SO. #800
W PALM BEACH FL 33401

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Rosemarie Siesbeck 1/20/97
Signature, typed or printed name of registered agent, and fee if applicable. (NOTE Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP DELETED
NAME OSTERGAARD, BENT
STREET ADDRESS 5763 FORESTWOOD CT
CITY-ST-ZIP JUPITER FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D DELETED
NAME WALSH, ROBERT
STREET ADDRESS 5900 STONEWOOD CT
CITY-ST-ZIP JUPITER FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DT DELETED
NAME SIEBENECK, ROSEMARIE
STREET ADDRESS 5822 STONEWOOD CT
CITY-ST-ZIP JUPITER FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE SD DELETED
NAME GEIGER, HILDA A
STREET ADDRESS 5763 PEACHWOOD CT
CITY-ST-ZIP JUPITER FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE VD DELETED
NAME MITCHELL, JAY
STREET ADDRESS 5905 STONEWOOD CT
CITY-ST-ZIP JUPITER FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D DELETED
NAME MAEDA, RIKI
STREET ADDRESS 5781 MARBLEWOOD CT
CITY-ST-ZIP JUPITER FL

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rosemarie Siesbeck 1/20/97 561-655-8977
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0043444

CR2E037 (9/96)