

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2004 8:00 am
Secretary of State

08-02-2004 90006 026 ****61.25

DOCUMENT # N05831

1. Entity Name
**WOODLAND ESTATES PROPERTY OWNERS'
ASSOCIATION, INC.**



Principal Place of Business
5910 STONEWOOD CT.
JUPITER, FL 33458

Mailing Address
5910 STONEWOOD CT.
JUPITER, FL 33458

54066025



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07212004

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Zip

Country

Zip

Country

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

DICKER, KRIWK
1818 AUSTRALIAN AVE. S, STE 400
WEST PALM BEACH, FL 33409

Name **DICKER, Kriwk + Stoloff**

Street Address (P.O. Box Number is Not Acceptable)

1818 Australian Ave. S, Ste 400

City **West Palm Bch, FL**

Zip Code **33409**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 8, 2004

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 **D** ☒ Delete
NAME **LAMONTAGNE, PAUL**
STREET ADDRESS **5851 STONEWOOD CT.**
CITY-ST-ZIP **JUPITER, FL 33458**

TITLE **S/D** ☐ Change ☒ Addition
NAME **Janet Byers**
STREET ADDRESS **5746 Forestwood Ct**
CITY-ST-ZIP **Jupiter, FL 33458**

TITLE **D** ☐ Delete
NAME **HAVENS, KARL**
STREET ADDRESS **5755 TURNWOOD CT.**
CITY-ST-ZIP **JUPITER, FL 33458**

TITLE **P/D** ☒ Change ☐ Addition
NAME **Havens, Karl**
STREET ADDRESS **5755 Turnwood Ct**
CITY-ST-ZIP **Jupiter, FL 33458**

TITLE **D** ☐ Delete
NAME **ARROWOOD, KATHRYN**
STREET ADDRESS **5893 STONEWOOD CT.**
CITY-ST-ZIP **JUPITER, FL 33458**

TITLE **V/D** ☒ Change ☐ Addition
NAME **Arrowood, Bruce**
STREET ADDRESS **5893 Stonewood Ct**
CITY-ST-ZIP **Jupiter, FL 33458**

TITLE **TR** ☐ Delete
NAME **RASMUSSEN, RENEE**
STREET ADDRESS **5761 TURNWOOD CT.**
CITY-ST-ZIP **JUPITER, FL 33458**

TITLE **T/D** ☒ Change ☐ Addition
NAME **Renee Rasmussen**
STREET ADDRESS **5761 Turnwood Ct**
CITY-ST-ZIP **Jupiter, FL 33458**

TITLE **TR** ☒ Delete
NAME **WALTERS, BILL**
STREET ADDRESS **5811 LONWOOD CT.**
CITY-ST-ZIP **JUPITER, FL 33458**

TITLE **D** ☐ Change ☒ Addition
NAME **Stefan Harzen**
STREET ADDRESS **5905 Stonewood Ct**
CITY-ST-ZIP **Jupiter, FL 33458**

TITLE **DPS** ☐ Delete
NAME **MCKENIZE, MICHELE**
STREET ADDRESS **5833 STONEWOOD CT**
CITY-ST-ZIP **JUPITER, FL 33458**

TITLE **D** ☒ Change ☐ Addition
NAME **mckenzie, Michele**
STREET ADDRESS **5833 Stonewood Ct**
CITY-ST-ZIP **Jupiter, FL 33458**

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: *Renee Rasmussen, Treasurer* **July 29, 2004** 561/743-4419
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #