2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N07050

Entity Name: WOODBRIDGE ESTATES ASSOCIATION, INC.

Current Principal Place of Business:

2768 MOSS OAK DR.
SARASOTA, FL 34231

New Principal Place of Business:

2477 STICKNEY POINT RD.
118A
SARASOTA, FL 34231

Current Mailing Address:

2768 MOSS OAK DR.
SARASOTA, FL 34231

New Mailing Address:

2477 STICKNEY POINT RD.
118A
SARASOTA, FL 34231

FEI Number: 65-0007520 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARGUS PROPERTY MANAGEMENT
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: S ( ) Delete
Name: TATUM, JOAN J
Address: 4152 MOSS OAK PL
City-St-Zip: SARASOTA, FL 34231

Title: P ( ) Delete
Name: SMITH, VANESSA
Address: 2619 MOSS OAK DR.
City-St-Zip: SARASOTA, FL 34231

Title: D ( ) Delete
Name: LAWRENCE, BILL
Address: 2743 MOSS OAK PL
City-St-Zip: SARASOTA, FL 34231

Title: D ( ) Delete
Name: MERCIER, JOHN
Address: 4186 MOSS OAK PLACE
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: VANESSA SMITH P 03/23/2009

Electronic Signature of Signing Officer or Director — Date