

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 02, 2004  
Secretary of State**

DOCUMENT# N09693

Entity Name: WOODSMERE ESTATES, INC.

**Current Principal Place of Business:**

980 BRIDLE LN  
ROCKLEDGE, FL 32955 US

**New Principal Place of Business:**

**Current Mailing Address:**

1694 CEDAR ST  
ROCKLEDGE, FL 32955 US

**New Mailing Address:**

FEI Number: 59-2864284      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DRESSLER, JAMES R  
110 DIXIE LANE  
COCOA BEACH, FL 32931

**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: CD ( ) Delete  
Name: DROPESKI, CYNDI  
Address: 680 W EAUGALLIE BLVD  
City-St-Zip: MELBOURNE, FL 32935

Title: VD ( ) Delete  
Name: COLUMBO, JOE  
Address: 2351 W EACR GARLLIE BLVD STE  
City-St-Zip: MELBOURNE, FL 32935

Title: D ( ) Delete  
Name: NUTTING, MR CHARLES  
Address: 719 E HIBISCUS BLVD  
City-St-Zip: MELBOURNE, FL

Title: TD ( ) Delete  
Name: MARQUEZ, ADRIAN  
Address: 100 SO SYKES CREEK PKWY  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: PD ( ) Delete  
Name: SCHWEINSBERG, JOHN R. JR.  
Address: 850 BELHURST LN  
City-St-Zip: ROCKLEDGE, FL

Title: SD (X) Delete  
Name: RUDOLPH, DON  
Address: 800 IMNVERNESS AVE  
City-St-Zip: MELBOURNE, FL 32940

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: C (X) Change ( ) Addition  
Name: DROPESKI, CYNDI  
Address: 680 W EAUGALLIE BLVD  
City-St-Zip: MELBOURNE, FL 32935

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

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

Title: D (X) Change ( ) Addition  
Name: MARQUEZ, ADRIAN  
Address: 100 SO SYKES CREEK PKWY  
City-St-Zip: MERRITT ISLAND, FL 32952

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 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 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: JOHN SCHWEINSBERG

PD

02/02/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date