## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED Feb 14, 2003 8:00 am Secretary of State

1/1

Entity Name	MENT # N13405 WOODS HOMEOWNERS ASS	OCIATION, INC.				01-10-2003	90074 035 **	**70.00
Principal Place	of Business	Mailing Address			,			
BBO CHELSEA I		PO BOX 14057						
880 CHELSEA PL N LEARWATER FL 33759 CLEARWATER FL 33766						erne augu a Bent Bert d'i Bit	eren erau erau Bicil I	H <b>111 H21</b>
2 Principal Pla	ace of Bulliness	3. Mailing Address					BJBH BIBH OFFIT OFFIT	JINI ILAI
2868 Melses PLM					'm' a	ICON HEDE IS MAK	ING CHANGES	
Suite, Apt. #, etc. Suite, Apt. #, e		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
		City & State			4. FEI Number 59-	2804327	<del></del>	lied For Applicable
Clebruster, FL							\$8.75 Addit	
Zip		Zip	Cor	ntry	5. Certificate of Stat	us Desired 💆	Fee Required	
337	59 JUSA	Devlatered Agent	<del></del>	و معاور آن نے پیچسی	7. Name and Addre	ss of New Register	ed Agent -	
	6. Name and Address of Current	Redisciso whole	<del></del>	Name ALL		JACOB ST	<b>N</b>	
CONFOCE LOGI				Street Address (P.O. Box Number is Not Acceptable)				
COLLEGE, LORI 2880 CHELDES PL NORTH							· V	
CI FARWA	ATER FL 39759			286	arwater	a Fin		
•	$\sim$			City C'LC	ARWATER	2	FL Zip Code	7.59
	e named entity submits this statement to	the surges of changing it	s register	ed office or registe	ered agent, or both, in the	ne State of Florida.	am familiar with, a	ind accept
8. The above	e named entity submits this statement to tions of registered agent.	it file harbase or cumilaris is	- 100	-				
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SIGNATURE	_ lillud for	(100	TE: Barrister	d Agent signature require	ed when reinstating)	D	ATE	
£2~~	Signifiure, typed or printed name of registered agent	and title if apparaties.			<del></del>			
	<u> </u>	9. Election Ca	ampaion	Financing	\$5.00 May Be	Make Cl	heck Payable i	to
	FILE NOW: FEE IS \$61.25	Trust Fund			Added to Fees	Florida De	epartment of S	tate
·					ADDITIONS/CHANGE	S TO OFFICERS AN	ID DIRECTORS IN	10
10.	OFFICERS AND DI		11		ADDITIONS/CHANGE	S TO OFFICE TO	☐ Change	Addition
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STREET ADDRESS		•	CH	Y-ST-ZIP				☐ Addition
CITY-ST-ZIP	VPD V2	PRES Delete	TIT	LE .			Change	Addition
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