

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 02, 2006  
Secretary of State**

DOCUMENT# N17314

Entity Name: WOODBRIAR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2135 VIRGINIA AVE  
#10  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

216 JACKSON AVE  
LEHIGH ACRES, FL 33972

**New Mailing Address:**

FEI Number: 04-2690071      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MAMMANO, SHIRLEY W VP  
216 JACKSON AVE  
LEHIGHT AVE, FL 33972      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:            PTD            ( ) Delete  
Name:            MAMMANO, NICK F  
Address:        216 JACKSON AVE  
City-St-Zip:    LEHIGH ACRES, FL 33972

Title:            VP            ( ) Delete  
Name:            MAMMANO, SHIRLEY W  
Address:        216 JACKSON AVE  
City-St-Zip:    LEHIGH ACRES, FL 33972

Title:            S/T            ( ) Delete  
Name:            SALCEDO, MANUEL  
Address:        2135 VIRGINIA AVE. #1  
City-St-Zip:    FT,MYERS, FL 33901

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHIRLEY MAMMANO

VP

04/02/2006

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

\_\_\_\_\_  
Date