

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90162 030 ****61.25

DOCUMENT # N94000002796

1. Entity Name
**WOODGATE ESTATES PROPERTY OWNERS
ASSOCIATION, INC.**



40077940

Principal Place of Business
**9411 CYPRESS LAKE DR
STE 2
FORT MYERS, FL 33919**

Mailing Address
**C/O SCHOO MANAGEMENT
9411 CYPRESS LAKE DR STE 2
FORT MYERS, FL 33919**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03282006

Chg-NP

CR2E037 (11/05)

4. FEI Number
65-0696074

Applied For
Not Applicable

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

**CRUZ, BRYAN
C/O SCHOO MANAGEMENT
9411 CYPRESS LAKE DR STE 2
FORT MYERS, FL 33919**

Name

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

City

FL

Zip Code

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 May 1, 2006**

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 NAME STREET ADDRESS CITY-ST-ZIP	D SYSKA, ANDREW J 8840 WOODGATE DR FORT MYERS, FL 33908	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KRIVAS, KATHY 8790 WOODGATE MANOR COURT FORT MYERS, FL 33908	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUCKLEY, CAROLYN 8811 WOODGATE DR FORT MYERS, FL 33908	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HAUGSJAA, GLENN 8841 WOODGATE DRIVE FORT MYERS, FL 33908	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STEWART, DIANE 8821 WOODGATE DRIVE FORT MYERS, FL 33908	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RINI, PAT 8850 WOODGATE DRIVE FORT MYERS, FL 33908	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Malcolm Amos Jr. 8791 Woodgate Drive Fort Myers, FL 33908	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 a address, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-13-06