2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N05831

1. Entity Name

WOODLAND ESTATES PROPERTY OWNERS' ASSOCIATION, I



FILED Aug 08, 2000 8:00 am Secretary of State

					1	08-08-200	n 90090 C	112 ****6	1 25	
Principal Plac	ce of Business	Mailing Address	-			00 00 200	0 20020 0	712 0	1.23	
5910 STONEY JUPITER FL 3		5910 STONEWOOD CT. JUPITER FL 33458								
		1								
2. Principal F	Place of Business	3. Mailing Address	. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State			4. FEI Numbe	NOT APPLI	CABLE	_ 	oplied For ot Applicable	
Zip Country		Zíp	Zip Country		5. Certificate	of Status Desired		\$8.75 Add Fee Require		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent -						
			Name	•						
ST. JOHN, DAVID 500 AUSTRALIAN AVE. SO. #800 W PALM BEACH FL 33401				Street Address (P.O. Box Number is Not Acceptable)						
										
		City				FL	Zip Code	8		
8. The above	e named entity submits this statement	for the purpose of changing i	ts registered office	or registere	ed agent, or bot	h, in the state of Fk	orida.			
•										
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NC	OTE: Registered Agent sig	nature required	when reinstating)		DATE			
		1				<u> </u>				
	FILE NOW: FEE IS \$61.25	9. Election Ca	mpaign Financing	\$5	.00 May Be	Mak	e Check I	Payable to	,	
	tember 13, 2000 min. will be \$	l	Contribution.		ded to Fees		partment			
							•			
10.	OFFICERS AND D	***************************************	11.		ADDITIONS/CH	ANGES TO OFFICE	RS AND DIE	RECTORS IN		
TITLE	DV	™ Delete	TITLE	D		0		Change	🔀 Addition	
NAME	WALSH, ROBERT		NAME	06044	they Cha	ppel wood Ct			Į	
STREET ADDRESS	5900 STONEWOOD CT		STREET ADDRES	S 200	stone	WOOOL CA				
CITY-ST-ZIP	JUPITER FL 33458			2051	TER FL	33458				
TITLE	D D	☐ Delete	TITLE					Change	☐ Addition	
NAME STREET ADDRESS	SIEBENECK, ROSEMARIE 5822 STONEWOOD CT		NAME STREET ADDRES							
CITY-ST-ZIP	JUPITER FL		CITY-ST-ZIP							
TITLE	D	☑ Delete	TITLE	\overline{a}				☐ Change		
NAME	NATHANSON, MARCELLA	APT Delete	NAME	Closes	Hopher F	ar Opu		☐ Criainge	LES AUGITION	
STREET ADDRESS	3673 SATIN WOOD CT		STREET ADDRES	S 6845	5 Stone ,	wood ct				
CITY-ST-ZIP	JUPITER FL 33458		CITY-ST-ZIP	700	ITER, AL	_ 33 YS &				
TITLE	DPS	⊠ Delete	TITLE	Œ				☐ Change	Addition	
NAME	SARDINHA, FRED		NAME	Angi	te Pave	elko		_, -		
STREET ADDRESS	5788 LONEWOOD CT		STREET ADDRES	ऽ ८ २ वें	9 Harbe	evood G				
CITY-ST-ZIP	JUPITER FL 33458		CITY-ST-ZIP	402	ITER B	L 33458				
TITLE	DTS	☐ Delete	TITLE					☐ Change	☐ Addition	
NAME	HANZEN, STEFAN		NAME							
STREET ADDRESS	5905 STONEWOOD CT		STREET ADDRES	s						
CITY-ST-ZIP	JUPITER FL 33458		CITY-ST-ZIP							
TITLE	D	☐ Delete	TITLE	29G				Change	Addition	
NAME	MCHENZIE, MICHELLE		NAME	Hich	ele Kch	enzie			ı	
STREET ADDRESS	3833 STONEWOOD CT		STREET ADDRES	s ≤ \$ 3 :	3 Stone	noog ct				
CITY-ST-ZIP	JUPITER FL 33458		CITY-ST-ZIP	1706	ITER, A	L 3345&			ļ	
12 I hereby o	certify that the information supplied wit	th this filing does not qualify f	or the exemption s		-		Lfurther cert	tify that the in	Mormation	

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 an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATUR學