

# 2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 17, 2002 8:00 am  
Secretary of State

02-17-2002 90081 012 \*\*\*\*61.25

DOCUMENT # N35668

1. Entity Name

WOODRIDGE OWNERS ASSOCIATION, INC.

Principal Place of Business

SE RUNNING OAK CIR  
COVE ROAD  
STUART FL 34999  
US

Mailing Address

5381 RUNNING OAK CIR SE  
STUART FL 34997  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0250553

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

IRLEND, RHEA A  
5397 SE RUNNING OAK CIR  
STUART FL 34997

CORRECT SPELLING IRELAND Rhea A. Ireland

Name

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

5397 SE Running OAK Circle

City

STUART

FL

Zip Code

34997

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.

CORRECTING SPELLING

SIGNATURE RHEA A IRELAND

*Rhea A Ireland*

1/29/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	ROY, JAMES F.	
STREET ADDRESS	5333 SE RUNNING OAK CIRCLE	
CITY-ST-ZIP	STUART FL 34997	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	MURPHY, PATRICK H.	
STREET ADDRESS	5469 SE RUNNING OAK CIRCLE	
CITY-ST-ZIP	STUART FL 34997	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	MCGINLEY, RUTH	
STREET ADDRESS	5027 SE BENTWOOD DRIVE	
CITY-ST-ZIP	STUART FL 34997	
TITLE	TD	<input type="checkbox"/> Delete
NAME	IRELAND, RHEA A	
STREET ADDRESS	5397 SE RUNNING OAK CIRCLE	
CITY-ST-ZIP	STUART FL 34997	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PINEAU, JOHN	
STREET ADDRESS	5438 SE RUNNING OAK CIRCLE	
CITY-ST-ZIP	STUART FL 34997	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURPHY PATRICK H	
STREET ADDRESS	5469 SE Running OAK Circle	
CITY-ST-ZIP	STUART FL 34997	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCARTHY J. DAVID	
STREET ADDRESS	5365 SE Running OAK Circle	
CITY-ST-ZIP	STUART FL 34997	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DENHARD Carol	
STREET ADDRESS	5566 SE Running OAK Circle	
CITY-ST-ZIP	STUART FL 34997	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	No change	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOPEK STANLEY	
STREET ADDRESS	5041 SE BENTWOOD DRIVE	
CITY-ST-ZIP	STUART FL 34997	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *RHEA A IRELAND*

1/29/02 561-223-1287

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)