2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 17, 2006 8:00 am Secretary of State 04-17-2006 90382 028 ****61.25 **DOCUMENT #743828** 1. Entity Name WOODGATE ASSOCIATION, INC. 40051490 Principal Place of Business Mailing Address 6908 SW 128TH CT 6908 SW 128TH CT MIAMI, FL 33183 MIAMI, FL 33183 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01102006 CR2E037 (11/05) Cha-NP City & State City & State Applied For 4. FEI Number 59-1866638 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCHNEID, DAVID J 6877 SW 18TH ST # 141 Street Address (P.O. Box Number is Not Acceptable) BOCA RATON, FL 33433 City 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) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Due by May 1, 2006 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. VD BUL ☐ Delete TITLE Change ☐ Addition $\mathcal{T}\mathcal{D}$. ESPINOSA , LILIA NAME KROCHMAL, FREDERIC S NAME 7108 SW 127 PL STREET ADDRESS 12732 SW 68 LANE STREET ADDRESS MIAMI, FL 33183 CITY-ST-ZIF CITY-ST-ZIP MIAHI , FL 33183 TITLE TD Delete TITLE **Addition** ☐ Change PEREIRA, MELCHOR RIVERA, REBECCA NAME NAME 6616 SW 127 CT STREET ADDRESS 12827 SW 67 TERR STREET ADDRESS MIAHI FL 33183 MIAMI, FL 33183 CITY+ST-2IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition LOPEZ, LIDIA 12736 SW 68 LN ESPINOSA, LILIA NAME NAME STREET ADDRESS 7108 SW 127 PL. STREET ADDRESS CITY-ST-ZIF MIAMI, FL 33183 CITY-ST-ZIP MIAMI, FL TITLE Delete TITLE Change ☐ Addition ALVAREZ, CELIA NAME NAME 12840 SW 67TH TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI, FL 33183 CITY-ST-ZIP TITLE TITLE Delete Change ☐ Addition GRAY, JERRILYN NAME NAME STREET ADDRESS 12945 SW 66 TERRACE DRIVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33183 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS

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 an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

AME O SIGNING OFFICER OR DIRECTOR

4 april 06

FILED