

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736232

FILED
Feb 23, 2007
Secretary of State

Entity Name: THE WOODGATE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 14153
CLEARWATER, FL 33766

New Principal Place of Business:

25941 US HWY 19 N
BOX 14153
CLEARWATER, FL 33766

Current Mailing Address:

PO BOX 14153
CLEARWATER, FL 33766

New Mailing Address:

FEI Number: 20-2282879 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RITTER, JENNIFER
2345 ASHMORE DRIVE
CLEARWATER, FL 337631646 US

Name and Address of New Registered Agent:

TROUTMAN, NORMAN V
2379 WILLOW TREE TRAIL
CLEARWATER, FL 33763 US

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: NORMAN V TROUTMAN

02/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RITTER, JENNIFER
Address: 2345 ASHMORE DRIVE
City-St-Zip: CLEARWATER, FL 337631646

Title: VD () Delete
Name: TROUTMAN, NORMAN V
Address: 2379 WILLOW TREE TRAIL
City-St-Zip: CLEARWATER, FL 337631631

Title: SD () Delete
Name: FIDLER, BARBARA
Address: 2443 TIMBERCREST CIRCLE W
City-St-Zip: CLEARWATER, FL 33763

Title: TD (X) Delete
Name: CLEGG, THOMAS M
Address: 2379 WILLOW TREE TRAIL
City-St-Zip: CLEARWATER, FL 337631631

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TROUTMAN, NORMAN V
Address: 2379 WILLOW TREE TRAIL
City-St-Zip: CLEARWATER, FL 33763

Title: SD (X) Change () Addition
Name: FIDLER, BARBARA
Address: 2443 TIMBERCREST CIRCLE W
City-St-Zip: CLEARWATER, FL 33763

Title: TD (X) Change () Addition
Name: CLEGG, THOMAS M
Address: 2379 WILLOW TREE TRAIL
City-St-Zip: CLEARWATER, FL 33763

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: THOMAS M CLEGG

TD

02/23/2007

Electronic Signature of Signing Officer or Director

Date