

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002918

FILED
Mar 18, 2009
Secretary of State

Entity Name: THE WOODLANDS AT IBIS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1061 E. INDIANTOWN RD
STE. 410
JUPITER, FL 33477

New Principal Place of Business:

Current Mailing Address:

1061 E. INDIANTOWN RD
STE. 410
JUPITER, FL 33477

New Mailing Address:

FEI Number: 26-0073417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS-GRAY, JUDY
1000 CLINT MOORE RD
STE 110
BOCA RATON, FL 334872847 US

Name and Address of New Registered Agent:

FREIN, ROBERT
8225 IBIS BLVD.
WEST PALM BEACH, FL 33412 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: ROBERT FREIN

03/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WALSH, NANCY
Address: 1000 CLINT MOORE RD, STE 110
City-St-Zip: BOCA RATON, FL 334872847

Title: VD () Delete
Name: BORG, DEAN
Address: 1000 CLINT MOORE RD., STE 110
City-St-Zip: BOCA RATON, FL 334872847

Title: STD () Delete
Name: MATTHEWS-GRAY, JUDY
Address: 1000 CLINT MOORE RD., STE 110
City-St-Zip: BOCA RATON, FL 334872847

Title: D (X) Delete
Name: FINKELSTEIN, RICHARD
Address: 1000 CLINT MOORE RD, STE 110
City-St-Zip: BOCA RATON, FL 334872847

Title: D (X) Delete
Name: ENDELSON, KENNETH M
Address: 1000 CLINT MOORE RD, STE 110
City-St-Zip: BOCA RATON, FL 334872847

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FREIN, ROBERT
Address: 8225 IBIS BLVD
City-St-Zip: WEST PALM BEACH, FL 33412

Title: VD (X) Change () Addition
Name: LOGUIDICE, STEVE
Address: 8225 IBIS BLVD
City-St-Zip: WEST PALM BEACH, FL 33412

Title: STD (X) Change () Addition
Name: ERDMAN, PATRICIA
Address: 8225 IBIS BLVD
City-St-Zip: WEST PALM BEACH, FL 33412

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT FREIN

PD

03/18/2009

Electronic Signature of Signing Officer or Director

Date