2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729670

Entity Name: ASSOCIATION OF WOODSIDE VILLAGE EAST, INC.

FILED Feb 03, 2020 Secretary of State 0355233977CC

CUrrent Principal Place of Business:

C/O LIGHTHOUSE PROPERTY MANAGEMENT

16 CHURCH ST. OSPREY, FL 34229

Current Mailing Address:

C/O LIGHTHOUSE PROPERTY MANAGEMENT 16 CHURCH ST. OSPREY, FL 34229 US

FEI Number: 59-1555345 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COCHRAN, MICHAEL LAW OFFICES OF WELLS & OLAH 1800 SECOND ST. #808 SARASOTA, FL 34236 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: MICHAEL COCHRAN 02/03/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title SECRETARY Title DIRECTOR

Name MALONE, DAN Name BAUMANN, JOHN

Address C/O LIGHTHOUSE PROPERTY Address C/O LIGHTHOUSE PROPERTY

MANAGEMENT
16 CHURCH ST.
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16 CHURCH ST.
16 CHURCH ST.

OSPREY FL 34229 City-State-Zip: OSPREY FL 34229

City-State-Zip: OSPREY FL 34229 City-State-Zip: OSPREY FL 34229

Title DIRECTOR Title PRESIDENT

Name HANSCOM, GALE Name KRAKOWIAK, ALAN

Address C/O LIGHTHOUSE PROPERTY Address C/O LIGHTHOUSE PROPERTY MANAGEMENT Address MANAGEMENT

16 CHURCH ST. 16 CHURCH ST.

City-State-Zip: OSPREY FL 34229 City-State-Zip: OSPREY FL 34229

Title TREASURER Title VP

Name BULLOCK, JOAN Name NORTHROP, RHONDA

Address C/O LIGHTHOUSE PROPERTY Address C/O LIGHTHOUSE PROPERTY

MANAGEMENT
16 CHURCH ST.
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16 CHURCH ST.

City-State-Zip: OSPREY FL 34229 City-State-Zip: OSPREY FL 34229

Title DIRECTOR

Name SNYDER, KATHY

Address C/O LIGHTHOUSE PROPERTY

MANAGEMENT 16 CHURCH ST.

City-State-Zip: OSPREY FL 34229

I hereby 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 all other like empowered.

SIGNATURE: ALAN KRAKOWIAK PRESIDENT 02/03/2020