

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741830

Entity Name: LAFORET AT WOODMONT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O A & W PROPERTY MANAGEMENT INC
9715 W BROWARD BLVD #2325
PLANTATION, FL 33324

Current Mailing Address:

A & W PROPERTY MGMT. INC
P.O. BOX 15624
PLANTATION, FL 33318

FEI Number: 59-2495525

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALKER, ARLINE
A & W PROPERTY MANAGEMENT
773 N W 100 TERRACE
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name BROWN, BARRY
Address 7571 BLACK OLIVE WAY
City-State-Zip: TAMARAC FL 33321

Title TREASURER, DIRECTOR
Name STEWART, BRIAN
Address 7591 BLACK OLIVE WAY
City-State-Zip: TAMARAC FL 33321

Title VP, DIRECTOR
Name NICOSIA, NICHOLAS
Address 7602 BLACK OLIVE WAY
City-State-Zip: TAMARAC FL 33321

Title DIRECTOR
Name APELBAUM, LAURIE
Address 8300 BLACK OLIVE DRIVE
City-State-Zip: TAMARAC FL 33321

Title SECRETARY, DIRECTOR
Name GREAVES, ANTHE
Address 7501 BLACK OLIVE WAY
City-State-Zip: TAMARAC FL 33321

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: BARRY BROWN

PRES

02/26/2013

Electronic Signature of Signing Officer/Director Detail

Date