

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000011459

**Entity Name:** THE WOODS AT SOUTHRIDGE HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Jan 16, 2014**  
**Secretary of State**  
**CC0561170638**

**Current Principal Place of Business:**

C/O PRESIDENTIAL GROUP SOUTH  
135 W PINEVIEW STREET  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

C/O PRESIDENTIAL GROUP SOUTH  
135 W PINEVIEW STREET  
ALTAMONTE SPRINGS, FL 32714 US

**FEI Number: 81-0668303**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PRESIDENTIAL GROUP SOUTH  
135 W PINEVIEW STREET  
ALTAMONTE SPRINGS, FL 32714 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 PD  
Name SLOAN, JEFFREY  
Address 135 W PINE VIEW ST  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title VPD  
Name KIRBY, ROB  
Address 135 W PINE VIEW ST  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title STD  
Name LEON, DAWN  
Address 135 W PINE VIEW ST  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

*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: JEFFREY SLOAN**

**PRESIDENT**

**01/16/2014**

Electronic Signature of Signing Officer/Director Detail

Date