

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07050

Entity Name: WOODBRIDGE ESTATES ASSOCIATION, INC.**Current Principal Place of Business:**C/O LIGHTHOUSE PROPERTY MGMT
16 CHURCH ST
OSPREY, FL 34229**Current Mailing Address:**C/O LIGHTHOUSE PROPERTY MGMT
16 CHURCH ST
OSPREY, FL 34229 US**FEI Number:** 65-0007520**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HILL, CINDY ESQ.
CINDY HILL, ESQ.
614 SOUTH TAMiami TRAIL
OSPREY, FL 34229 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:** CINDY HILL

03/11/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	SAUL, JON
Address	C/O LIGHTHOUSE PROPERTY MGMT 16 CHURCH ST
City-State-Zip:	OSPREY FL 34229

Title	VP
Name	WALTERS, DAVID
Address	C/O LIGHTHOUSE PROPERTY MGMT 16 CHURCH ST OSPREY
City-State-Zip:	FL FL 34229

Title	PRESIDENT
Name	CONKLIN, BRIGITTE
Address	C/O LIGHTHOUSE PROPERTY MGMT 16 CHURCH ST
City-State-Zip:	OSPREY FL 34229

Title	TREASURER
Name	STROUPE, PENNY
Address	C/O LIGHTHOUSE PROPERTY MGMT 16 CHURCH ST OSPREY
City-State-Zip:	FL FL 34229

Title	DIRECTOR
Name	GOULD, EDMOND
Address	C/O LIGHTHOUSE PROPERTY MGMT 16 CHURCH STREET
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: CONKLIN BRIGITTE

PRESIDENT

03/11/2022

Electronic Signature of Signing Officer/Director Detail

Date