

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22907

**Entity Name:** WOODRIDGE HOA, INC.

**Current Principal Place of Business:**

BETWEEN SR 54 & COUNTY LINE RD  
LUTZ, FL 33559

**Current Mailing Address:**

P.O. BOX 4  
LUTZ, FL 33548 US

**FEI Number: 59-3255288**

**Certificate of Status Desired: No**

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

TURNER, SHARON  
23709 OAKSIDE BLVD  
LUTZ, FL 33559 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            PRES  
Name            CHAMPAGNE, GARY  
Address        1449 WATERWOOD DR.  
City-State-Zip: LUTZ FL 33559

Title            VP  
Name            FREDA, PAT  
Address        23721 OAKSIDE BLVD.  
City-State-Zip: LUTZ FL 33559

Title            SEC  
Name            MYCEWICZ, DAWN  
Address        23616 HARDWOOD  
City-State-Zip: LUTZ FL 33559

Title            TREA  
Name            TURNER, SHARON  
Address        23709 OAKSIDE BLVD  
City-State-Zip: LUTZ FL 33559

Title            ARB  
Name            RANDALL, MICHAEL  
Address        1435 WATERWOOD  
City-State-Zip: LUTZ FL 33559

*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: SHARON TURNER**

**TREASURER**

**02/09/2017**

Electronic Signature of Signing Officer/Director Detail

Date