

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 248119

**Entity Name:** WOODCREST TERRACE APARTMENTS INC

**Current Principal Place of Business:**

615 SOUTH RIVERSIDE DRIVE  
#7  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

615 S RIVERSIDE DRIVE  
#7  
POMPANO BEACH, FL 33062 US

**FEI Number:** 59-1454410

**Certificate of Status Desired:** No

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

KING, CONNIE  
615 S. RIVERSIDE DRIVE  
#7  
POMPANO BEACH, FL 33062 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:** CONNIE S. KING

04/26/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name KING, CLIFF  
Address 2831 NE 8TH COURT  
City-State-Zip: POMPANO BEACH FL 33062

Title P  
Name KING, CONNIE  
Address 2831 NE 8TH COURT  
City-State-Zip: POMPANO BEACH FL 33062

Title S  
Name VERSE, SELMA  
Address 5081 SE BURNING TREE CIRCLE  
City-State-Zip: STUART FL 34997

Title V  
Name JUDE, RUTH  
Address 615 S. RIVERSIDE DRIVE  
#1  
City-State-Zip: POMPANO BEACH FL 33062

Title D  
Name ROONEY, SEAN  
Address 615 S. RIVERSIDE DRIVE  
#2  
City-State-Zip: POMPANO BEACH FL 33062

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CLIFF KING

TREASURER

04/26/2013

Electronic Signature of Signing Officer/Director Detail

Date