

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90386 034 ***150.00

DOCUMENT # 248119

1. Entity Name
WOODCREST TERRACE APARTMENTS INC



Principal Place of Business
**615 SOUTH RIVERSIDE DRIVE
POMPANO BEACH, FL 33062**

Mailing Address
**615 SOUTH RIVERSIDE DRIVE
POMPANO BEACH, FL 33062**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03302006 Chg-P CR2E034 (11/05)

City & State

City & State

4. FEI Number
59-1454410

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RAPP, PATRICIA
615 S RIVERSIDE DR #9
POMPANO BCH, FL 33062**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
RAPP, PATRICIA
615 S RIVERSIDE DR 9
POMPANO BCH, FL 33062** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
DUNN, AMY
615 S RIVERSIDE DR 2
POMPANO BEACH, FL 33062** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
CONNIE KING
1500 W. CYPRESS CREEK RD., STE. 303
FT. LAUDERDALE, FL 33309** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
KING, CLIFFORD
615 S RIVERSIDE DRIVE 7
POMPANO BEACH, FL 33062** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
JOHN EPIFANIO
2442 FRANKLIN DR.
VINELAND, NJ 08361** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
DEWAYNE CARTER
615 S. RIVERSIDE DR. 10
POMPANO BEACH, FL 33062** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia Rapp PATRICIA RAPP 4/18/06 954-941-7210
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #