

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 24, 2006 8:00 am**  
**Secretary of State**

03-24-2006 90035 035 \*\*\*\*61.25

**DOCUMENT # 719943**

1. Entity Name  
**THE WOODLAND HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business  
**7100 W. COMMERCIAL BLVD.  
107  
LAUDERHILL, FL 33319 US**

Mailing Address  
**7100 WEST COMMERCIAL BLVD  
SUITE 107  
LAUDERHILL, FL 33319**

**50005390**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072006

Chg-NP

CR2E037 (11/05)

City & State

City & State

4. FEI Number  
**59-1347069**

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

**AMBASSADOR COMMUNITY MGMT INC  
7100 W. COMMERCIAL BLVD  
SUITE 107  
LAUDERHILL, FL 33319**

7. Name and Address of New Registered Agent

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

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME TALABISCO, JACK ☒ Delete  
STREET ADDRESS 5215 WHITE OAK LANE  
CITY-ST-ZIP FORT LAUDERDALE, FL 33319

TITLE SD  
NAME MARGOIS, SEYMOUR ☐ Delete  
STREET ADDRESS 4704 QUEEN PALM LANE  
CITY-ST-ZIP TAMARAC, FL 33319

TITLE TD  
NAME BLANK, SHIRLEY ☐ Delete  
STREET ADDRESS 5704 S TRAVELERS PALM LN  
CITY-ST-ZIP FORT LAUDERDALE, FL 33319

TITLE VPD  
NAME TORN, LARRY ☐ Delete  
STREET ADDRESS 4500 KING PALM DR  
CITY-ST-ZIP TAMARAC, FL 33319

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE SD ☐ Change ☒ Addition  
NAME MARIAN TENNER  
STREET ADDRESS 5728 S. Bayberry Lane  
CITY-ST-ZIP Tamarac, FL 33319

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

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 617, 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:

*[Signature]*

3/21/06

954-741-8811 x22

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #