

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90014 043 ****61.25

DOCUMENT # 720045

1. Entity Name
WOODLANDS I 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 US**

40046782



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02072008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2168563

Applied For

Not Applicable

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

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

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, 2008**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME KICKLIGHTER, JLEILANI
STREET ADDRESS 5102 LAUREL CIRCLE
CITY-ST-ZIP TAMARAC, FL 33319

TITLE VP ☐ Change ☒ Addition
NAME Palmer, Arthur, F.
STREET ADDRESS 5208 Buttonwood Ct.
CITY-ST-ZIP Tamarac, FL 33319

TITLE D ☐ Delete
NAME SLOANE, ALAN
STREET ADDRESS 5208 BOTTONWOOD CT.
CITY-ST-ZIP TAMARAC, FL 33319

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

TITLE SD ☒ Delete
NAME SAN ANTONIO, DEBBIE
STREET ADDRESS 4601 CAVENDISH CIR
CITY-ST-ZIP TAMARAC, FL 33319

TITLE SD ☐ Change ☒ Addition
NAME Wise, Wayne, T.
STREET ADDRESS 5208 Buttonwood Ct.
CITY-ST-ZIP Tamarac, FL 33319

TITLE VP ☒ Delete
NAME BERGER, ALFRED
STREET ADDRESS 5205 BAYBERRY LANE
CITY-ST-ZIP FORT LAUDERDALE, FL 33319

TITLE TD ☐ Change ☒ Addition
NAME Francis, Fay, D
STREET ADDRESS 5401 Bayberry Ln.
CITY-ST-ZIP Tamarac, FL 33319

TITLE D ☒ Delete
NAME DELEMA, ANTHONY
STREET ADDRESS 5104 LAUREL CIRCLE
CITY-ST-ZIP FORT LAUDERDALE, FL 33319

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

RECEIVED

MAR 05 2008

CIU REV/ADM

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alan Sloane 2/27/08

Date

Daytime Phone #