2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#726085

FILED Mar 23, 2009 Secretary of State

Entity Name: WOODLANDS GOLF ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4600 WOODLANDS BLVD TAMARAC, FL 33319 US

Current Mailing Address: New Mailing Address:

4600 WOODLANDS BLVD TAMARAC, FL 33319

OFFICERS AND DIRECTORS:

FEI Number: 59-1461337 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RANDALL KAYE ROGER & ASSOCIATES, P.A. 621 NW 53RD STREET #300 BOCA RATON, FL 33487

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

TALABISCO, JACK MELLGREN, MICHELE Name: Name: 5215 WHITE OAK LANE Address: 4509 KING PALM DRIVE Address: City-St-Zip: TAMARAC, FL 33319 City-St-Zip: TAMARAC, FL 33319

Title: Title: (X) Change () Addition () Delete SONENBERG, HAROLD Name: SPECTOR, ARTHUR Name:

Address: 4910 BANYAN LN Address: 4604 QUEEN PALM LANE City-St-Zip: TAMARAC, FL 33319 City-St-Zip: TAMARAC, FL 33319

Title: () Delete Title: (X) Change () Addition WILD, STANLEY BUCK, STEVE Name: Name:

Address: 6201 ORCHARD TREE LANE Address: 4508 KING PALM DRIVE

City-St-Zip: TAMARAC, FL 33319 City-St-Zip: TAMARAC, FL 33319

Title: V1 () Delete Title: (X) Change () Addition Name: GELMAN, RICHARD Name: BURDIGE, CINDY

4903 WOODLANDS BLVD Address: Address: 9108 VINEYARD LAKE DRIVE City-St-Zip: TAMARAC, FL 33319 City-St-Zip: PLANTATION, FL 33324

Title: (X) Delete Title: () Change () Addition

STARK, NORMAN Name: Name: 5704 COCO PALM DRIVE Address: Address: City-St-Zip: TAMARAC, FL 33319 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: STEVE BUCK V 03/23/2009