

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 22, 2008 8:00 am**  
**Secretary of State**

04-22-2008 90020 012 \*\*\*\*61.25

**DOCUMENT # 731593**

1. Entity Name

WOODHAVEN CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

22020 WOODHAVEN DRIVE  
BOCA RATON FL 33433

Mailing Address

1215 E. HILLSBORO BLVD  
DEERFIELD BEACH FL 33441



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

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1896872

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

CAMPBELL PROPERTY MGMT.  
1215 E. HILLSBORO BLVD  
DEERFIELD BEACH FL 33441

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 is required when reinstating)

DATE

**FILE NOW: 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

TITLE VP ☐ Delete  
NAME FORQUIELE, ANTHONY  
STREET ADDRESS 666 APRING BOTTOM WAY  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE D ☒ Delete  
NAME CAZIN, ALEXANDER  
STREET ADDRESS 22039 COCO PALM WAY  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE S ☐ Delete  
NAME DUBINSKY, JANICE  
STREET ADDRESS 6624 BURNINGWOOD DR  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE P ☐ Delete  
NAME ZOLCHONOCK, WILLIAM  
STREET ADDRESS 6514 SPRING BOTTOM WAY  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE TD ☐ Delete  
NAME DUDLEY, JANE  
STREET ADDRESS 6531 SPRING BOTTOM WAY  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition  
NAME JOSEPHINE PASLER  
STREET ADDRESS 6557 BURNING WOOD DRIVE  
CITY-ST-ZIP BOCA RATON, FL 33433

TITLE D ☐ Change ☒ Addition  
NAME BILL FELDMAN  
STREET ADDRESS 6561 SPRING BOTTOM WAY  
CITY-ST-ZIP BOCA RATON, FL 33433

TITLE D ☐ Change ☐ Addition  
NAME RAY CHIAPPARDI  
STREET ADDRESS 6526 BURNING WOOD DRIVE  
CITY-ST-ZIP BOCA RATON, FL 33433

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

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

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 Section 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:

*William M. Zolchonock* WILLIAM M. ZOLCHONOCK 4/7/08