

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741548

FILED
Jan 08, 2009
Secretary of State

Entity Name: WOODCREEK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1801 N.E. 140TH STREET
NORTH MIAMI, FL 33181 US

New Principal Place of Business:

Current Mailing Address:

1801 N.E. 140TH STREET
NORTH MIAMI, FL 33181 US

New Mailing Address:

FEI Number: 59-1855930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AVENDANO, LILIA
1801 N.E. 140TH STREET, #301
NORTH MIAMI, FL 33181 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AVENDANO, LILIA
Address: 1801 N.E. 140TH STREET, #301
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: VP () Delete
Name: PINEIRO, JAVIER
Address: 1801 N.E. 140TH STREET, #309
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: V () Delete
Name: THOMAS, MARIE
Address: 1801 N.E. 140TH STREET, #209
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: S () Delete
Name: ESTRADA, JEANETTE
Address: 1801 N.E. 140TH STREET, #104
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: T () Delete
Name: AVENDANO, GUILLERMO
Address: 1801 N.E. 140TH STREET, #301
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT () Change (X) Addition
Name: BAZAN, LUZ
Address: 1801 N.E. 140 TH. STREET # 212
City-St-Zip: NORTH MIAMI, FL 33181 US

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: LILIA AVENDANO

P

01/08/2009

Electronic Signature of Signing Officer or Director

Date