

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743570

FILED
Jan 09, 2008
Secretary of State

Entity Name: WOODRUN HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8213 BRISTOL CT.
TALLAHASSEE, FL 32311 US

New Principal Place of Business:

Current Mailing Address:

8213 BRISTOL CT.
TALLAHASSEE, FL 32311 US

New Mailing Address:

FEI Number: 59-3577289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOD, PATRICIA
8213 BRISTOL CT.
TALLAHASSEE, FL 32311 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: TD () Delete
Name: HOOD, PATRICIA
Address: 8213 BRISTOL CT
City-St-Zip: TALLAHASSEE, FL 32311

Title: VPD () Delete
Name: STRUBBLE, LAWRENCE
Address: 2161 PORTSMOUTH CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: PD () Delete
Name: GREY, LEWIS
Address: 8208 BRISTOL COURT
City-St-Zip: TALLAHASSEE, FL 32311

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:

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: PATRICIA HOOD

TD

01/09/2008

Electronic Signature of Signing Officer or Director

Date