

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745480

FILED  
Mar 29, 2012  
Secretary of State

**Entity Name:** WOODMONT PROPERTY OWNERS ASSOCIATION OF TAMARAC, INC.

**Current Principal Place of Business:**

8765 AZALEA CT  
9-101  
TAMARAC, FL 33321

**New Principal Place of Business:**

7924 NW 82 STREET  
TAMARAC, FL 33321

**Current Mailing Address:**

P.O. BOX 25383  
TAMARAC, FL 33320

**New Mailing Address:**

P.O. BOX 25555  
TAMARAC, FL 33320

**FEI Number:** 59-1982262

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VIVERETTE, HAROLD L  
7924 NW 83RD STREET  
TAMARAC, FL 33321 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: PRES  
Name: VIVERETTE, HAROLD L  
Address: 7924 NW 83RD STREET  
City-St-Zip: TAMARAC, FL 33321

Title: TRES  
Name: LIEBERMAN, SANFORD  
Address: 7852 NW 77 AVE  
City-St-Zip: TAMARAC, FL 33321

Title: VP  
Name: PLACKO, DEBORA  
Address: 8555 NW 77TH STREET  
City-St-Zip: TAMARAC, FL 33321

Title: CS  
Name: COUTCHER, JAY  
Address: 8173 ROYAL PALM COURT  
City-St-Zip: TAMARAC, FL 33321

Title: VP  
Name: KARMEN, NEIL  
Address: 7921 HIBISCUS CIR  
City-St-Zip: TAMARAC, FL 33321

I hereby 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 all other like empowered.

SIGNATURE: LEE VIVERETTE

PRES

03/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date