

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746320

FILED  
Apr 15, 2011  
Secretary of State

Entity Name: WOODLAND VILLAS CONDOMINIUM I ASSOCIATION, INC.

## Current Principal Place of Business:

SEABOARDN ARBORS MANAGEMENT  
2189 CLEVELAND ST, STE 225  
CLEARWATER, FL 33765 US

## New Principal Place of Business:

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779 US

## Current Mailing Address:

SEABOARDN ARBORS MANAGEMENT  
2189 CLEVELAND ST, STE 225  
CLEARWATER, FL 33765 US

## New Mailing Address:

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779 US

FEI Number: 59-1977450

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEIGHTON, LENNARD A  
2189 CLEVELAND ST  
STE 225  
CLEARWATER, FL 33765 US

## Name and Address of New Registered Agent:

HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 STE 5000  
LONGWOOD, FL 32779 US

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: JAMES W HART JR

04/15/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD  
Name: MACLEAN, BOB  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

Title: VPD  
Name: SHANYFELT, JIM  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

Title: SD  
Name: HUGHES, KAY  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

Title: TD  
Name: LIMA, BOB  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

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: BOB MACLEAN

PD

04/15/2011

Electronic Signature of Signing Officer or Director

Date