

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746349

FILED
Apr 13, 2009
Secretary of State

Entity Name: THE WOODS OF PORT ST. JOHN PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

925 MACCO RD
COCOA, FL 32927

New Principal Place of Business:

Current Mailing Address:

925 MACCO RD
COCOA, FL 32927

New Mailing Address:

FEI Number: 59-2011299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, SHERI
1021 GALLEON
COCOA, FL 32927 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: PREITZ, RICHARD
Address: 442 ARBELLA
City-St-Zip: COCOA, FL 32927

Title: V () Delete
Name: BOETTJER, ALFRED
Address: 1000 GALLEON
City-St-Zip: COCOA, FL 32927

Title: T () Delete
Name: HOWARD, LINDA
Address: 1000 GALLEON
City-St-Zip: COCOA, FL 32927

Title: D () Delete
Name: BRADLEY, SR, JONATHAN
Address: 1235 W TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

Title: S () Delete
Name: ROBINSON, SUZANNE
Address: 940 EYERLY
City-St-Zip: COCOA, FL 32927

Title: D () Delete
Name: SNEESBY, SHIRLEY
Address: 920 GALLEON DR
City-St-Zip: COCOA, FL 32927

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: D (X) Change () Addition
Name: BIENIASZ, PATRICIA
Address: 940 TOPE
City-St-Zip: COCOA, FL 32927

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

Title: D (X) Change () Addition
Name: DITTEMER, KELLY
Address: 955 PALM
City-St-Zip: COCOA, FL 32927

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: RICHARD PREITZ

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date