


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 08, 2008 8:00 am**  
**Secretary of State**

08-08-2008 90015 030 \*\*\*\*61.25

<b>DOCUMENT # 746669</b> 1. Entity Name <b>WOODLAND VILLAGE CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>2180 WEST SR 434, SUIT 5000 LONGWOOD, FL 32779-5044 US</b>				Mailing Address <b>2180 WEST SR 434, SUIT 5000 LONGWOOD, FL 32779-5044 US</b>	
2. Principal Place of Business - No P.O. Box # <b>3639 Cortez Rd. W.</b>		3. Mailing Address <b>P.O. Box 916</b>			
Suite, Apt. #, etc. <b>Suite 109</b>		Suite, Apt. #, etc.			
City & State <b>Bradenton, FL</b>		City & State <b>Bradenton, FL</b>		4. FEI Number <b>59-1960302</b>	
Zip <b>34210</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip <b>34210</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
Name <b>Diane S. Barcus</b>				Name <b>Diane S. Barcus</b>	
Street Address (P.O. Box Number is Not Acceptable) <b>3639 Cortez Rd. W. Suite 109</b>				Street Address (P.O. Box Number is Not Acceptable) <b>3639 Cortez Rd. W. Suite 109</b>	
City <b>Bradenton</b>				City <b>Bradenton</b>	
State <b>FL</b>				State <b>FL</b>	
Zip Code <b>34206</b>				Zip Code <b>34206</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <b>Diane S. Barcus, Manager</b>				DATE <b>July 17, 2008</b>	
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VPD LEWIS, SHARON 5109 29TH ST W BRADENTON, FL 34207</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P MINER, JENNIFER 5110 28TH ST W BRADENTON, FL 34207</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>TD SHOEMAKER, DONA 2612 51ST AVE W BRADENTON, FL 34207</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D OUELLET, Bernie 5112 28th St. W. Bradenton, FL 34207</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>S GREEN, KELLY 5110 27TH ST. W BRADENTON, FL 34207</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D DEAN, SUE 5111 29TH ST W BRADENTON, FL 34207</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D THOMAS, Gerald 5113 27th St. W. Bradenton, FL 34207</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Jennifer Miner, President *Jennifer Miner* 7-31-08 941-746-4998  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #