## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jun 10, 2009 **DOCUMENT#750952** Secretary of State

Entity Name: WOODLAKE VILLAGE TOWNHOMES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

4230 N.W. 114 TERRACE CORAL SPRINGS, FL 33065 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 9568 CORAL SPRINGS, FL 33075

FEI Number: 59-2070037 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

THE LAW OFFICES OF BILU & BILU 2700 WEST ATLANTIC BLVD SUITE 204 - 21 POMPANO BEACH, FL 33069 US

**OFFICERS AND DIRECTORS:** 

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:

Date

Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**PRES** () Delete () Change () Addition

FONSECA, MAURO Name: Name: 4262 NW 114 TERRACE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition BURROWES, GRACE Name: FONSECA, MAURO Name:

Address: 4222 NW 114TH TERRACE Address: 4262 NW 114TH TERRACE City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

Title: () Delete Title: TRE (X) Change ( ) Addition

LENTZ, DIANA FONSECA, MAURO Name: Name: Address: 4224 N.W. 114 TERRACE Address: 4262 N.W. 114 TERRACE City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

(X) Change ( ) Addition Title: SECR ( ) Delete Title: SECR Name: FONSECA, MAURO Name: WATTERS, CHRISTINE Address: 4262 NW 114TH TERRACE Address: 4242 NW 114TH TERRACE City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

Title: () Delete Title: (X) Change ( ) Addition

BARBOSA, ALVARO Name: Name: BARBOSA, ALVARO 4226 NW 114TH TERRACE 4226 NW 114TH TERRACE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

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: MAURO FONSECA **PRES** 06/10/2009