2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empty

SIGNATURE: _

Apr 26, 2004 8:00 am Secretary of State **DOCUMENT # 752076** 04-26-2004 90523 016 ****61.25 WOODBERRY LAKES HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address ASSOCIATED PROPERTY MGMT 1928 LAKE WORTH RD LAKE WORTH FL 33461 ASSOCIATED PROPERTY MGMT 1928 LAKE WORTH RD LAKE WORTH FL 33461 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-2171323 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DICKER, KRIVOK & STOLOFF, P.A. Street Address (P.O. Box Number is Not Acceptable) 1818 AUSTRALIAN AVE SOUTH - STE 400 WEST PALM BEACH FL 33409 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE ☐ Change **★** Addition HOMA, MICHAEL 5005 CAYENNE LANE BELIECH, STEPHEN NAME NAME 11179 MARGORAM DRIVE STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33418 PARM BEACH GARDENS, 12 3348 CITY-ST-ZIP CITY-ST-ZIP DΡ TITLE ☐ Delete TITLE VAN VOORHEES, WOODIE EINHORN, JOAN NAME NAME 11206 THYME DR. 5048 THYME DR STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33418 CITY-ST-ZIP CITY-ST-ZIP PAIN BEACH GARDENS, TITLE ☐ Delete TITLE JACOBS, CHERI--NAME NAME 1223 CURRY DR 704 THYME STREET ADDRESS STREET ADDRESS PLAM BEACH GARDENS FL 33418 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change *ddition WHITE, DON NAME NAME 5036 CAYENNE LANE STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33418 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition AUERBACH, PAUL NAME NAME 11215 CURRY DRIVE STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33418 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition ALOIA, JOSEPH NAME 5021 PAPRIKA LANE STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33418 CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

vered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

orhees

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