

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 19, 2007 8:00 am**  
**Secretary of State**

03-19-2007 90051 015 \*\*\*\*61.25

<b>DOCUMENT #758746</b> 1. Entity Name <b>WOODSIDE CONDOMINIUM ASSOCIATION, INC.</b>			
Principal Place of Business <b>12394 S.W. 82 AVE</b> <b>MIAMI, FL 33156 US</b>		Mailing Address <b>PO BOX 565820</b> <b>12396 SW 82 AVE</b> <b>MIAMI, FL 33156 US</b>	
2. Principal Place of Business - No P.O. Box # <b>9000 SW 152nd Street</b>		3. Mailing Address <b>9000 SW 152nd Street</b>	
Suite, Apt. #, etc. <b>#102</b>		Suite, Apt. #, etc. <b>#102</b>	
City & State <b>MIAMI FL</b>		City & State <b>MIAMI, FL</b>	
Zip <b>33157</b>		Zip <b>33157</b>	
Country <b>USA</b>		Country <b>USA</b>	
4. FEI Number <b>59-2252584</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>SCOTT, JOSEPH F. CPM</b> <b>12394 S.W. 82 AVE</b> <b>MIAMI, FL 33156</b>		7. Name and Address of New Registered Agent Name <b>JOSEPH F. SCOTT, CPM</b> Street Address (P.O. Box Number is Not Acceptable) <b>9000 SW 152nd Street #102</b> City <b>MIAMI</b> <b>FL</b> Zip Code <b>33157</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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstating) DATE</small>			
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Make check payable to <b>Florida Department of State</b>			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE <b>PD</b>	NAME <b>STANFIELD, SUSAN</b>	TITLE <b>V.P.</b>	NAME <b>Robert Fisher</b>
STREET ADDRESS <b>9631 SW 77 AVE #308</b>	CITY-ST-ZIP <b>MIAMI, FL 33156</b>	STREET ADDRESS <b>9631 SW 77 Ave #207C</b>	CITY-ST-ZIP <b>Miami, FL 33156</b>
TITLE <b>PD</b>	NAME <b>BROWN, VICTOR</b>	TITLE <b>TV</b>	NAME <b>Alvaro Bernal</b>
STREET ADDRESS <b>9611 SW 77 AVE #201</b>	CITY-ST-ZIP <b>MIAMI, FL</b>	STREET ADDRESS <b>9601 SW 77 Ave #101F</b>	CITY-ST-ZIP <b>Miami, FL 33156</b>
TITLE <b>President</b>	NAME <b>ANDERHUB, GINA</b>	TITLE <b>Secretary</b>	NAME <b>Aina Penoz-Stable</b>
STREET ADDRESS <b>9661 SW 77 AVE F102</b>	CITY-ST-ZIP <b>MIAMI, FL 33156</b>	STREET ADDRESS <b>9621 SW 77 Ave #307B</b>	CITY-ST-ZIP <b>Miami, FL 33156</b>
TITLE <b>SB</b>	NAME <b>BOYCE, DON</b>	TITLE 	NAME 
STREET ADDRESS <b>9631 SW 77 AVENUE, # 106</b>	CITY-ST-ZIP <b>MIAMI, FL 33156</b>	STREET ADDRESS 	CITY-ST-ZIP 
TITLE <b>D</b>	NAME <b>BARRIOS, ALEX</b>	TITLE 	NAME 
STREET ADDRESS <b>9611 SW 77 AVE #104</b>	CITY-ST-ZIP <b>MIAMI, FL 33156</b>	STREET ADDRESS 	CITY-ST-ZIP 
TITLE 	NAME 	TITLE 	NAME 
STREET ADDRESS 	CITY-ST-ZIP 	STREET ADDRESS 	CITY-ST-ZIP 
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:		3/1/07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		3052547228	