2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# 768098

Entity Name: THE ASSOCIATION OF WOOD BROOK MOBILE HOME ESTATES, INC.

Current Principal Place of Business:

1510 ARIANA ST
UNIT 500
LAKELAND, FL 33803 US

New Principal Place of Business:

Current Mailing Address:

1510 ARIANA ST
UNIT 500
LAKELAND, FL 33803 US

New Mailing Address:

FEI Number: 59-2201272 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RULON, RON
1510 ARIANA ST
UNIT 112
LAKELAND, FL 33803 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:	PPD	( ) Delete
Name:	LUSK, WRAY	
Address:	1510 ARIANA ST LOT 211	
City-St-Zip:	LAKELAND, FL 33083	
Title:	VD	( ) Delete
Name:	BARKHOUSE, CRAWFORD	
Address:	1510 ARIANA ST LOT 115	
City-St-Zip:	LAKELAND, FL 33803	
Title:	S	( ) Delete
Name:	BRENT, VIKKI	
Address:	1510 W ARIANA ST #238	
City-St-Zip:	LAKELAND, FL 33083	
Title:	TD	( ) Delete
Name:	DUBELL, HARRY	
Address:	1510 ARIANA ST, LOT 184	
City-St-Zip:	LAKELAND, FL 33803	
Title:	PD	( ) Delete
Name:	RULON, RON	
Address:	1510 ARIANA ST LOT 112	
City-St-Zip:	LAKELAND, FL 33803	
Title:	D	( ) Delete
Name:	HYDE, JOHN	
Address:	1510 ARIANA ST LOT 102	
City-St-Zip:	LAKELAND, FL 33803	

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

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: HARRY DUBELL TD 03/30/2009

Electronic Signature of Signing Officer or Director — Date