## 2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Apr 28, 2008 8:00 am Secretary of State

04-28-2008 90370 002 \*\*\*\*61.25

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WOODSIDE VILLAS CONDOMINIUM ASSOCIATION, INC. 40000100 Principal Place of Business Mailing Address WOODSIDE VILLAS **WOODSIDE VILLAS** 7200 SW 8TH AVENUE #150 7200 SW 8TH AVENUE #150 GAINESVILLE, FL 32607 GAINESVILLE, FL 32607 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 04042008 Chg-NP CR2E037 (12/06) FEI Number 59-2533650 Applied For City & State City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -ซิ. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Bosshardt Property
Street Address (P.O. Box Number is Not Acceptable)
5522 NW Y3rd St Management Inc CURL, REBECCA L BOSSHARDT PROPERTY MGT 5522 NW 43RD STREET STE 8 GAINESVILLE, FL 32653 Craino SUSILO 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 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Florida Department of State Trust Fund Contribution. Added to Fees Due by May 1, 2008 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete TITLE TITLE Jack Horsely LOFTIN, JENNIFER 7200 SW 8 MAUC # 58 NAME NAME 7200 SW 8TH AVE #127 STREET ADDRESS STREET ADDRESS GAINESVILLE, FL 32607 CITY-ST-ZIP CITY-ST-ZIP Grainesville FL 32607 Anthony Crevishaw ☐ Addition TITLE TITLE **M**elete HORSELY, JACK NAME 7200 SW 800 AUR #64 7200 SW 8TH AVE., #58 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GAINESVILLE, FL 32607 CITY-ST-ZIP Goinesville FL 32607 Change TITLE **Delete** TITLE ☐ Addition Walter Collier #60 CARMEAN, JOHN NAME NAME STREET ADDRESS 7200 SW 8TH AVE., #T-130 STREET ADDRESS GAINESVILLE, FL 32607 CITY-ST-ZIP CITY-ST-ZIP لاحد معين الع TD ☐ Delete TITLE ☐ Change ☐ Addition TITLE EMERITO, RAMOS NAME NAME 7200 SW 8TH AVE #89 STREET ADDRESS STREET ADDRESS GAINESVILLE, FL 32607 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE LASKIN, ALEXANDER NAME NAME STREET ADDRESS 7200 SW 89TH AVE #122 STREET ADDRESS GAINESVILLE, FL 32607 CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.