2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 18, 2008
Secretary of State

DOCUMENT# N01000001968

Entity Name: WOODBRIDGE COMMERCE CENTER PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

6221 WEST ATLANTIC BLVD
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

6221 WEST ATLANTIC BLVD
MARGATE, FL 33063

New Mailing Address:

FEI Number: 56-2374602 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QURESHI, DENISE
6221 WEST ATLANTIC BLVD
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

NEWMARK, TRACY B ESQ
2650 WEST STATE ROAD 84
SUITE 101C
FORT LAUDERDALE, FL 33312 US

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: TRACY BELINDA NEWMARK 12/18/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: QURESHI, DENISE
Address: 6221 WEST ATLANTIC BLVD
City-St-Zip: MARGATE, FL 33063

Title: D (X) Delete
Name: QURESHI, MAHAMMAD A
Address: 6221 WEST ATLANTIC BLVD
City-St-Zip: MARGATE, FL 33063

Title: D (X) Delete
Name: SIDDIQUI, SHAHIDA A
Address: 6221 WEST ATLANTIC BLVD
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: QURESHI, MAHAMMAD A
Address: 6221 WEST ATLANTIC BLVD
City-St-Zip: MARGATE, FL 33063

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: MAHAMMAD A QURESHI D 12/18/2008
Electronic Signature of Signing Officer or Director Date