

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90077 049 ****61.25

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01242007 Chg-NP CR2E037 (12/06)

DOCUMENT # N01000002630 1. Entity Name WOODLAND MANOR ESTATES HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 1085 LUTZ, FL 33548-1085			Mailing Address P.O. BOX 1085 LUTZ, FL 33548-1085		
2. Principal Place of Business - No P.O. Box # 1123 Newberger Road A/L		3. Mailing Address SAME AS ABOVE			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Lutz, Florida		City & State 		4. FEI Number 75-2997155	
Zip 33549		Country USA		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent HUGENSCHMIDT, ELLEN 116 W. 109TH AVE. TAMPA, FL 33612			7. Name and Address of New Registered Agent Name BRADLEY JONES Street Address (P.O. Box Number is Not Acceptable) 19602 WOODLAND MANOR PLACE City Lutz FL 33549		
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 BRADLEY C. JONES, TREASURER 1/25/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE P NAME PINGEL, RYAN STREET ADDRESS 19602 WOODLAND MANOR PLACE CITY-ST-ZIP LUTZ, FL 33549	<input checked="" type="checkbox"/> Delete		TITLE P NAME JOHN C. CALDER STREET ADDRESS 19604 WOODLAND MANOR PLACE CITY-ST-ZIP LUTZ, FL 33549	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE VP NAME BAMBERY, DAVID STREET ADDRESS 19621 WOODLAND MANOR PLACE CITY-ST-ZIP LUTZ, FL 33549	<input checked="" type="checkbox"/> Delete		TITLE V.P. NAME AMY BAI STREET ADDRESS 18011 MAUI ISLE DRIVE CITY-ST-ZIP TAMPA, FL 33647	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE S NAME CHAMBERLAIN, EDWIN W III STREET ADDRESS 19618 WOODLAND MANOR PLACE CITY-ST-ZIP LUTZ, FL 33549	<input checked="" type="checkbox"/> Delete		TITLE S NAME SCOTT BARONE STREET ADDRESS 19625 WOODLAND MANOR PLACE CITY-ST-ZIP LUTZ, FL 33549	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE T NAME HUGENSCHMIDT, ELLEN D STREET ADDRESS 116 W 109TH AVE CITY-ST-ZIP TAMPA, FL 33612	<input checked="" type="checkbox"/> Delete		TITLE T NAME BRADLEY C. JONES STREET ADDRESS 19602 WOODLAND MANOR PLACE CITY-ST-ZIP LUTZ, FL 33549	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 supplementing 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: BRADLEY C. JONES			2/7/07 227-262-1313 <small>Date Daytime Phone #</small>		