

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002770

FILED
Apr 09, 2011
Secretary of State

Entity Name: WOODBRIDGE HOMEOWNERS ASSOCIATION AT SUNTREE, INC.

Current Principal Place of Business:

685 WOODBRIDGE DR
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

685 WOODBRIDGE DR
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 59-3719213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAILS, ROBERT
685 WOODBRIDGE DR
MELBOURNE, FL 32940 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: VP
Name: SCHMID, MARILYN
Address: 623 CEDARSIDE WAY
City-St-Zip: MELBOURNE, FL 32940

Title: P
Name: HAILS, ROBERT
Address: 685 WOODBRIDGE DR
City-St-Zip: MELBOURNE, FL 32940

Title: S
Name: KING, SHIRLEY
Address: 673 CANDLEWOOD WAY
City-St-Zip: MELBOURNE, FL 32940

Title: T
Name: BAERST, ROBERT S
Address: 635 WOODBROOK WAY
City-St-Zip: MELBOURNE, FL 32940

Title: D
Name: HUTCHENSON, KEVIN
Address: 627 SUGARWOOD WAY
City-St-Zip: MELBOURNE, FL 32940

Title: D
Name: LUSH, CHRISTOPHER
Address: 633 CEDARSIDE WAY
City-St-Zip: MELBOURNE, FL 32940

I hereby 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 all other like empowered.

SIGNATURE: ROBERT S. BAERST

T

04/09/2011

Electronic Signature of Signing Officer or Director

Date