## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000004686

FILED Apr 30, 2009 Secretary of State

Entity Name: WOODFIELD AT HERITAGE OAKS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** WOODSIELD CIRCLE WOODFIELD CIRCLE SUITE 106 MELBOURNE, FL 32904 MELBOURNE, FL 32904 **New Mailing Address: Current Mailing Address:** P.O.BOX 120415 1978 US 1 SUITE 106 MELBOURNE, FL 32912 ROCKLEDGE, FL 32955 FEI Number: 59-3741065 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COMMUNITY RESOURCE MGMT ADVANCED PROPERTY MANAGEMENT 19 E CENTRAL BLVD 1978 US 1 SUITE 106 ORLANDO, FL 32801 US ROCKLEDGE, FL 32955 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: VAN MOORE 04/30/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DVP () Delete (X) Change ( ) Addition CONNORS, JOEN MILLER, JANET Name: Name: 2153 WOODFIELD CIR Address: 1978 US 1 SUITE 106 Address: City-St-Zip: WEST MELBOURNE, FL 32904 City-St-Zip: ROCKLEDGE, FL 32955 Title: Title: ( ) Change (X) Addition ( ) Delete Name: DALRYMPLE, VIC Name: Address: Address: 1978 US 1 SUITE 106 City-St-Zip: City-St-Zip: ROCKLEDGE, FL 32955 Title: () Delete Title: VPD ( ) Change (X) Addition OWEN, PAUL Name: Name: Address: Address: 1978 US 1 SUITE 106 City-St-Zip: City-St-Zip: ROCKLEDGE, FL 32955 ( ) Change (X) Addition Title: () Delete Title: SD Name: Name: MARCY, LORI Address: Address: 1978 US 1 SUITE 106 City-St-Zip: City-St-Zip: ROCKLEDGE, FL 32955 Title: () Delete Title: ( ) Change (X) Addition HOWELL, ANNA Name: Name: 1978 US 1 SUITE 106 Address: Address: City-St-Zip: City-St-Zip: ROCKLEDGE, FL 32955 Title: () Delete Title: ( ) Change (X) Addition BERTHELETTE, KIM Name: Name: Address: Address: 1978 US 1 SUITE 106 ROCKLEDGE, FL 32955 City-St-Zip: 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: VAN MOORE RA 04/30/2009