

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003843

**FILED**  
**Mar 08, 2012**  
**Secretary of State**

**Entity Name:** WOODLAND CREEK AT OSCEOLA HOMEOWNERS ASSOCIATION INC.

**Current Principal Place of Business:**

241 RUBY AVENUE  
KISSIMMEE, FL 34741 US

**New Principal Place of Business:**

811 MABBETTE STREET  
KISSIMMEE, FL 34741 US

**Current Mailing Address:**

241 RUBY AVENUE  
KISSIMMEE, FL 34741 US

**New Mailing Address:**

811 MABBETTE STREET  
KISSIMMEE, FL 34741 US

FEI Number: 51-0498617

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ASSOCIATION SOLUTIONS OF CENTRAL FL, INC  
241 RUBY AVENUE  
KISSIMMEE, FL 34741 US

**Name and Address of New Registered Agent:**

ASSOCIATION SOLUTIONS OF CENTRAL FL, INC  
811 MABBETTE STREET  
KISSIMMEE, FL 34741 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: MARK HILLS

03/08/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: JIMENEZ, ESTHER  
Address: 614 WOODLAND CREEK BOULEVARD  
City-St-Zip: KISSIMMEE, FL 34744

Title: DVP  
Name: ROWE, JAMES  
Address: 686 WOODLAND CREEK BOULEVARD  
City-St-Zip: KISSIMMEE, FL 34744

Title: DST  
Name: GONZALEZ, EDGARDO  
Address: 503 WOODLAND CREEK BOULEVARD  
City-St-Zip: KISSIMMEE, FL 34744

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: MARK HILLS

RA

03/08/2012

Electronic Signature of Signing Officer or Director

Date