

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010676

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** NORTH WOODS ROAD ASSOCIATION, INC.

**Current Principal Place of Business:**

1110 DEL PRADO BLVD. SOUTH  
SUITE B  
CAPE CORAL, FL 33990 US

**New Principal Place of Business:**

**Current Mailing Address:**

1110 DEL PRADO BLVD. SOUTH  
SUITE B  
CAPE CORAL, FL 33990 US

**New Mailing Address:**

**FEI Number:** 76-0752742

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WIEDERHOLD, ROGER  
1110 DEL PRADO BLVD. S  
# B  
CAPE CORAL, FL 33990 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: D  
Name: MILLER, WILLIAM (BILL)  
Address: 17580 EAGLE VIEW LANE  
City-St-Zip: CAPE CORAL, FL 33909

Title: D  
Name: HAYTAC, KAMIL  
Address: 12801 EAGLE RD  
City-St-Zip: CAPE CORAL, FL 33909

Title: D  
Name: DORO, MARC  
Address: 13221 COUNTRY EAGLE LANE  
City-St-Zip: CAPE CORAL, FL 33909

Title: D  
Name: WIEDERHOLD, ROGER  
Address: 12761 EAGLE ROAD  
City-St-Zip: CAPE CORAL, FL 33909

Title: D  
Name: SCHUMAN, KENNETH L  
Address: 12320 COUNTRY EAGLE LANE  
City-St-Zip: CAPE CORAL, FL 33909

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: ROGER WIEDERHOLD

PRES

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date