

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03162

FILED
Feb 18, 2009
Secretary of State

Entity Name: WOODLAND VILLAGES MASTER HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1136 NE 14TH STREET
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

1136 NE 14TH ST
OCALA, FL 34470 US

New Mailing Address:

FEI Number: 59-2421266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERB, DANE
1136 NE 14TH ST
OCALA, FL 34470 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: PD () Delete
Name: HERB, DANE
Address: 1136 NE 14TH ST
City-St-Zip: Ocala, FL 34470

Title: D () Delete
Name: DEJOHN, BOB
Address: 2416 SE 23RD ST
City-St-Zip: Ocala, FL 34471

Title: SD () Delete
Name: MISHKIN, MIKE
Address: 2325 SE 19TH CIRCLE
City-St-Zip: Ocala, FL 34471

Title: VD () Delete
Name: MOLHAN, LOU
Address: 2417 SE 18TH CIRCLE
City-St-Zip: Ocala, FL 34471

Title: TD () Delete
Name: CLARKE, DENNIS
Address: 2303 SE 18TH CIR
City-St-Zip: Ocala, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: DEJOHN, BOB
Address: 2416 SE 23RD ST
City-St-Zip: Ocala, FL 34471

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MINZENBERG, ELAYNE
Address: 2313 SOUTHEAST 18TH CIRCLE
City-St-Zip: Ocala, FL 34471

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: DANE HERB

PD

02/18/2009

Electronic Signature of Signing Officer or Director

Date