

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001360

FILED
Mar 30, 2009
Secretary of State

Entity Name: THE WOODS AT CONQUISTADOR HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3808 AVENIDA MADERA
BRADENTON, FL 34210

New Principal Place of Business:

Current Mailing Address:

3808 AVENIDA MADERA
BRADENTON, FL 34210

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FELDMAN, MARC H
3908 26TH STREET WEST
BRADENTON, FL 34205 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: DT () Delete
Name: JABLONSKI, ED
Address: 4004 AVENIDA MADERA
City-St-Zip: BRADENTON, FL 34210

Title: D () Delete
Name: SMITH, PHIL
Address: 3705 AVENIOA MADERA
City-St-Zip: BRADENTON, FL 34210

Title: DS () Delete
Name: CLARK, CHERY
Address: 3706 AVENIDA MADERA
City-St-Zip: BRADENTON, FL 34210

Title: DV () Delete
Name: HARKINS, ANNETTE
Address: 4103 AVENIOA MADERA
City-St-Zip: BRADENTON, FL 34210

Title: DP () Delete
Name: BUCKHOLZ, CAROL
Address: 3808 AVENIDA MADERA
City-St-Zip: BRADENTON, FL 34210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: CAROL A. BUCKHOLZ

PRES

03/30/2009

Electronic Signature of Signing Officer or Director

Date