## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Aug 26, 2006 DOCUMENT# N05550 Secretary of State

Entity Name: WOODLANDS EAST HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

C/O DAVID D VESSEY 971 CITRUS WOOD CT LONGWOOD, FL 327502700 US

**New Mailing Address: Current Mailing Address:** 

C/O DAVID D VESSEY 971 CITRUS WOOD COURT LONGWOOD, FL 327502700 US

FEI Number: 59-2618444 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:

VESSEY, DAVID D 971 CITRUS WOOD CT LONGWOOD, FL 327502700 US

**OFFICERS AND DIRECTORS:** 

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:

Date

Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

VICTORIA, WILLIAMS WILLIAMS, VICTORIA Name: Name: 1290 EASTLAND POINT Address: 1290 EASTLAND POINT Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

Title: SD ( ) Delete Title: (X) Change ( ) Addition FORGY, DORIS S Name: MONCKTON, LYNDA Name:

Address: 1297 EASTLAND POINT Address: 943 CITRUS WOOD COURT City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

Title: () Delete Title: () Change () Addition

VESSEY, DAVID D Name: Name: 971 CITRUS WOOD COURT Address: Address: City-St-Zip: LONGWOOD, FL 327502700 City-St-Zip:

(X) Change ( ) Addition Title: VD ( ) Delete Title: VD Name: LYNDA, MONCKTON Name: PHILLIPS, FRANK 943 CITRUS WOOD COURT Address: Address: 967 CITRUS WOOD COURT

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

Title: () Delete Title: (X) Change ( ) Addition

NEWMAN, RUTH BOLLINGER, LINDA Name: Name: 939 CITRUS WOOD COURT 959 CITRUS WOOD COURT Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID D. VESSEY TD 08/26/2006