

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05599

**FILED**  
**Mar 15, 2012**  
**Secretary of State**

**Entity Name:** WOODLAND OAKS HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

4400 BAYOU BLVD  
SUITE 35  
PENSACOLA, FL 32504

**New Principal Place of Business:**

3530 PARKWOOD AVENUE  
PENSACOLA, FL 32504

**Current Mailing Address:**

4400 BAYOU BLVD  
SUITE 35  
PENSACOLA, FL 32504

**New Mailing Address:**

3530 PARKWOOD AVENUE  
PENSACOLA, FL 32504

**FEI Number:** 59-2473692

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LONGWELL, TINA  
4400 BAYOU BLVD  
SUITE 35  
PENSACOLA, FL 32503 US

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

SIEGFRIED, CLIFFORD A  
3530 PARKWOOD AVENUE  
PENSACOLA, FL 32504 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: C. ADAM SIEGFRIED

03/15/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SIEGFRIED, CLIFFORD A  
Address: 3530 PARKWOOD AVE  
City-St-Zip: PENSACOLA, FL 32504

Title: S  
Name: FRENCH, NANCY  
Address: 3526 PARKWOOD LN  
City-St-Zip: PENSACOLA, FL 32504

Title: T  
Name: POSSE, CAROLYN  
Address: 3536 PARKWOOD AVE  
City-St-Zip: PENSACOLA, FL 32504

Title: MDL  
Name: NORTHROP, MICK  
Address: 3504 PARKWOOD AVE  
City-St-Zip: PENSACOLA, FL 32504

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: C. ADAM SIEGFRIED

P

03/15/2012

Electronic Signature of Signing Officer or Director

Date