2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# N08000009675

Entity Name: WOODBRIDGE MOBILE HOME OWNERS, INC.

Current Principal Place of Business:

11055 SE FEDERAL HIGHWAY
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

11055 SE FEDERAL HIGHWAY
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: 59-2664245 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BONAN, ELIZABETH P ESQ
759 SOUTH FEDERAL HIGHWAY SUITE 212
STUART, FL 34994 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: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Change (X) Addition
Name: BROWN, JOHN
Address: 11055 SE FEDERAL HIGHWAY #12
City-St-Zip: HOBE SOUND, FL 33455

Title: VPD ( ) Change (X) Addition
Name: PHIPPS, RONALD
Address: 11055 SE FEDERAL HIGHWAY #39
City-St-Zip: HOBE SOUND, FL 33455

Title: SD ( ) Change (X) Addition
Name: FULLER, JOAN
Address: 11055 SE FEDERAL HIGHWAY #54
City-St-Zip: HOBE SOUND, FL 33455

Title: TD ( ) Change (X) Addition
Name: KIRKPATRICK, PATRICIA
Address: 11055 SE FEDERAL HIGHWAY #68
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Change (X) Addition
Name: FIKE, CHARLES
Address: 11055 SE FEDERAL HIGHWAY #49
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Change (X) Addition
Name: SPINNEY, EDWARD
Address: 11055 SE FEDERAL HIGHWAY #96
City-St-Zip: HOBE SOUND, FL 33455

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: JOHN BROWN PRES 02/23/2009

Electronic Signature of Signing Officer or Director — Date