

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09030

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** WOODSHIRE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O SANDCASTLE COMMUNITY MGMT  
1719 TRADE CENTER WAY  
NAPLES, FL 34109

**New Principal Place of Business:**

WOODSHIRE LANE  
NAPLES, FL 34105

**Current Mailing Address:**

C/O SANDCASTLE COMMUNITY MGMT  
P.O. BOX 8478  
NAPLES, FL 34101

**New Mailing Address:**

6704 LONE OAK BLVD  
NAPLES, FL 34109

**FEI Number:** 59-2519162

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS, BRAD  
C/O SANDCASTLE COMMUNITY MGMT  
1719 TRADE CENTER WAY #4  
NAPLES, FL 34109 US

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

GUARDIAN PROPERTY MANAGEMENT  
6704 LONE OAK BLVD  
NAPLES, FL 34109 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: BYRON ROSS

04/28/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SCHROER, JERRY  
Address: 220 WOODSHIRE LANE  
City-St-Zip: NAPLES, FL 34105

Title: VP  
Name: LAVIN, MICHAEL  
Address: 210 WOODSHIRE LANE  
City-St-Zip: NAPLES, FL 34105

Title: SD  
Name: GINTER, NANCY  
Address: 108 WOODSHIRE LANE  
City-St-Zip: NAPLES, FL 34105

Title: T  
Name: COFFIN, LENARD  
Address: 112 WOODSIRE LANE  
City-St-Zip: NAPLES, FL 34105

Title: VP2  
Name: O'REILLY, MICHAEL  
Address: 219 WOODSHIRE LANE  
City-St-Zip: NAPLES, FL 34105

Title: D  
Name: WILDEY, GEORGE  
Address: 212 WOODSHIRE LANE  
City-St-Zip: NAPLES, FL 34105

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: BYRON ROSS

MGR

04/28/2010

Electronic Signature of Signing Officer or Director

Date