

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16267

FILED
Apr 16, 2009
Secretary of State

Entity Name: WOODSIDE ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 8726
CORAL SPRINGS, FL 33075 US

New Mailing Address:

FEI Number: 65-0062251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTEGRITY MANAGEMENT
953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 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: STD () Delete
Name: DIPENTIMA, DONALD
Address: 3200 N UNIVERSITY DR #210
City-St-Zip: CORAL SPRINGS, FL

Title: VPD () Delete
Name: MENCORELLI, J.R.
Address: 3907 SANCTUARY DR
City-St-Zip: POMPANO BEACH, FL 33065

Title: PD () Delete
Name: RITTER, MARY
Address: 3555 ORCHARD DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DIPENTIMA, DONALD
Address: 3200 N UNIVERSITY DR #210
City-St-Zip: CORAL SPRINGS, FL

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

Title: STD (X) Change () Addition
Name: RITTER, MARY
Address: 3555 ORCHARD DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

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: DONALD DIPENTIMA

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date