2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 18, 2008 8:00 am Secretary of State

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DOCUMENT # N16891 1. Entity Name WOODBRIDGE ON THE GREEN HOMEOWNERS' ASSOCIATION, INC.					4-18-2008 90038	015 ****61.25	
Principal Place of Business C/O ATTWOOD-PHILLIPS INC 1350 ORANGE AVE STE 100 WINTER PARK, FL 32789 US		Mailing Address C/O ATTWOOD-PHILLIPS INC 1350 ORANGE AVE STE 100 WINTER PARK, FL 32789 US		4007		: BIEN BIEN TIBN BIBNIT BI ITB	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03312008 _C	hg-NP CR2	E037 (12/06)	
City & State		City & State		4. FEI Number 59-273153	37	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of S	tatus Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current F	Registered Agent		7. Name and Add	dress of New Register	ed Agent	
CACDEDO	ANI A ELETOUES	Name	•.				
	NI & FLETCHER ARLES RICHARD BEALL BLVC FL 32713	STE 2	Street Addres	(P.O. Box Number is Not Acceptable)			
,							
			City		F	Zip Code	
	named entity submits this statement for	the purpose of changing its	registered office or regi	stered agent, or both, in	the State of Florida. I	am familiar with, and accep	
the obligat	ions of registered agent.	1					
٠ ــــــــ .	Mr. C. Kar	//-			4-13-0	f .	
SIGNATURE.	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	: Registered Agent signature req	uired when reinstating)	DAT	ΤE	
		• Stantian Car	i Cii	47.00		ack reveble to	
<i>**</i>	Filing Fee is \$61.25 Due by May 1, 2008		Selection Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make check payable to Florida Department of State		
10. ,	OFFICERS AND DIR	RECTORS	11.	ADDITIONS/CHANG	SES TO OFFICERS AND	DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KNOWLES, BRENDA 14003 FAIRWAY WILLOW LN WINTER GARDEN, FL 34787	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Change □ Additio	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WOOD, RAY 4126 WILLOW BAY DR WINTER GARDEN, FL 34787	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BUTCH, HEWITT 4253 WILLOW BAY DR WINTER GARDEN, FL 34787	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, SALLYE 4008 WILLOW BAY DR WINTER GARDEN, FL 34787	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Additio	
TITLE · NAME STREET ADDRESS CITY-ST-ZIP	D FRANKS, JOHN 14037 FAIRWAY WILLOW LN WINTER GARDEN, FL 34787	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Change □ Additio	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPEO REPRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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Descriptions

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