2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N20954

Entity Name: PROPERTY OWNERS ASSOCIATION OF UNIVERSITY WOODS, INC.

Current Principal Place of Business:

3254 PAISLEY CIRCLE
ORLANDO, FL 328171941

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5613
WINTER PARK, FL 327935613

New Mailing Address:

FEI Number: 59-2887538 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, ARNOLD E PRES
3254 PAISLEY CIRCLE
ORLANDO, FL 32817 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:	PD	( ) Delete
Name:	JONES, ARNOLD E	
Address:	3254 PAISLEY CIRCLE	
City-St-Zip:	ORLANDO, FL 32817 OR	
Title:	VD	( ) Delete
Name:	MEEHAN, SCOTT	
Address:	3441 PAISLEY CIRCLE	
City-St-Zip:	ORLANDO, FL 32817	
Title:	SD	( ) Delete
Name:	AGUIRRE, FRANK	
Address:	10505 ABINGDON CHASE	
City-St-Zip:	ORLANDO, FL 32817	
Title:	TD	( ) Delete
Name:	PALMER, MARK	
Address:	3307 HADLEIGH CREST	
City-St-Zip:	ORLANDO, FL 32817 OR	
Title:	SD	( ) Delete
Name:	HANSHAW, RENZY	
Address:	3125 RIDER PLACE	
City-St-Zip:	ORLANDO, FL 32817	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ARNOLD E. JONES PD 04/17/2009
Electronic Signature of Signing Officer or Director — Date