## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23016

FILED Jaņ 2<u>0, 2</u>009 Secretary of State

Entity Name: THE WOODLANDS OF LAKE WASHINGTON HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3570 HAMMOCK TRAIL MELBOURNE, FL 32934 US **Current Mailing Address: New Mailing Address:** WOODLANDS OF LAKE WASHINGTON HOA 3570 HAMMOCK TRAIL MELBOURNE, FL 32934 US FEI Number: 59-2884987 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KENT, EDWARD S KENT, EDWARD S PRES 3570 HAMMOCK TRAIL 3570 HAMMOCK TRAIL MELBOURNE, FL 32934 MELBOURNE, FL 32934 US 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: EDWARD S KENT 01/20/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition EISENHAUER, KAREN Name: Name: 3510 CHARLTON PL Address: Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: Title: PD () Delete Title: () Change () Addition KENT, EDWARD S Name: Name: Address: 3570 HAMMOCK TRAIL Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: Title: () Delete Title: () Change () Addition HIGBIE, RICHARD Name: Name: 3512 SAMUEL PLACE Address: Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: Title: VD ( ) Delete Title: () Change () Addition Name: DEFINE, TOM Name: Address: 3700 BRENNAN DRIVE Address: City-St-Zip: MELBOURNE, FL 32934 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: EDWARD S KENT **PRES** 01/20/2009