

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28012

FILED
May 30, 2008
Secretary of State

Entity Name: WOODMERE PROFESSIONAL OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2375 TAMIAMI TR N #206
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

2375 TAMIAMI TR N #206
EXCEL REAL ESTATE SERVICES
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 65-0068423 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CHEFFY, JANE Y
2375 TAMIAMI TRAIL NORTH
SUITE 310
NAPLES, FL 34103 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHEFFY, JANE
Address: 2375 TAMIAMI TRAIL N. #310
City-St-Zip: NAPLES, FL 34103

Title: VD () Delete
Name: THOMPSON, LINDA
Address: 2375 TAMIAMI TRAIL N. #100
City-St-Zip: NAPLES, FL 34103

Title: S () Delete
Name: DAVIES, CHRIS
Address: 2375 TAMIAMI TRAIL NORTH #308
City-St-Zip: NAPLES, FL 34103

Title: T () Delete
Name: GUSTASON, RON
Address: 2375 TAMIAMI TRAIL N. #110
City-St-Zip: NAPLES, FL 34103

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:

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: JANE CHEFFY

PD

05/30/2008

Electronic Signature of Signing Officer or Director

Date