

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28125

FILED
Jan 12, 2009
Secretary of State

Entity Name: NORTHWOOD PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O SHAWN WEST
421 NE FORD DR
MADISON, FL 32340 US

New Principal Place of Business:

C/O DONNA BLAIR
379 NE NIXON LOOP
MADISON, FL 32340 US

Current Mailing Address:

PO BOX 1081
MADISON, FL 32341

New Mailing Address:

FEI Number: 59-2946653 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAIR, DONNA
370 NE NIXON LOOP
MADISON, FL 32340 US

Name and Address of New Registered Agent:

BLAIR, DONNA
379 NE NIXON LOOP
MADISON, FL 32340 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: _____

01/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLAIR, DONNA
Address: 379 NE NIXON LOOP
City-St-Zip: MADISON, FL 32340

Title: VP () Delete
Name: MOORE, JAMIE
Address: 980 NE NIXON LOOP
City-St-Zip: MADISON, FL 32340

Title: SD () Delete
Name: WOBB, LILO
Address: 740 NE NIXON LOOP
City-St-Zip: MADISON, FL 32340

Title: TD () Delete
Name: DRUMMOND, PEGGY
Address: 494 NE NIXON LOOP
City-St-Zip: MADISON, FL 32340

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: JOHNSTON, MARVIN
Address: 542 NE SAPPHIRE WAY
City-St-Zip: JENSON BEACH, FL 34957

Title: SD (X) Change () Addition
Name: WEBB, LILA
Address: 740 NE NIXON LOOP
City-St-Zip: MADISON, FL 32340

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: DONNA BLAIR

P

01/12/2009

Electronic Signature of Signing Officer or Director

Date