

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29297

FILED  
Apr 29, 2011  
Secretary of State

**Entity Name:** THE WOODS AT LAKE SEMINOLE, PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2189 CLEVELAND STREET, STE 225  
CLEARWATER, FL 33765 US

**New Principal Place of Business:**

25400 US 19 NORTH  
164  
CLEARWATER, FL 33763 US

**Current Mailing Address:**

2189 CLEVELAND STREET, STE 225  
CLEARWATER, FL 33765 US

**New Mailing Address:**

25400 US 19 NORTH  
164  
CLEARWATER, FL 33763

**FEI Number:** 59-2951460

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

LEIGHTON, LENNARD A  
2189 CLEVELAND STREET, STE 225  
CLEARWATER, FL 33765 US

**Name and Address of New Registered Agent:**

STEEES, BOBBY  
25400 US 19 NORTH SUITE  
#164  
CLEARWATER, FL 33763 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: BOBBY STEES

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HETRICK, BENJAMIN  
Address: 9100 CHERRY TRACE  
City-St-Zip: SEMINOLE, FL 33777

Title: VP  
Name: HERB, ROBERT  
Address: 10464 MYRTLE OAK LN  
City-St-Zip: SEMINOLE, FL 33777

Title: TD  
Name: NEEDHAM, KRISTEN  
Address: 10271 MYRTLE OAK LANE  
City-St-Zip: LARGO, FL 33777

Title: SD  
Name: KOTCHEY, ALICE  
Address: 10321 MYRTLE OAK LN  
City-St-Zip: LARGO, FL 33777

Title: D  
Name: DEAN, KIMBERLY  
Address: 9158 BIRCH DRIVE  
City-St-Zip: LARGO, FL 33777

Title: D  
Name: A'HARA, HEIDI  
Address: 10259 MYRTLE OAK LANE  
City-St-Zip: LARGO, FL 33777

I hereby 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 all other like empowered.

SIGNATURE: BENJAMIN H. HETRICK

P

04/29/2011

Electronic Signature of Signing Officer or Director

Date