


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 23, 2007 8:00 am**  
**Secretary of State**

03-23-2007 90005 007 \*\*\*\*61.25

<b>DOCUMENT # N36328</b>	
1. Entity Name <b>WOODBIDGE II HOMEOWNERS' ASSOCIATION, INC.</b>	

Principal Place of Business <b>3105 W ORANGE CC DR WINTER GARDEN, FL 34787</b>	Mailing Address <b>3105 W ORANGE CC DR WINTER GARDEN, FL 34787</b>
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40039720



2. Principal Place of Business - No P.O. Box # <b>3105 W. Orange CC Dr.</b>	3. Mailing Address <b>3105 W. Orange CC Dr.</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

02162007 Chg-NP CR2E037 (12/06)

City & State <b>Winter Garden, FL</b>	City & State <b>Winter Garden, FL</b>
Zip <b>34787</b>	Country <b>USA</b>

4. FEI Number <b>59-3017483</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent <b>TAILLEN, GREG 3105 W ORANGE COUNTRY CLUB DR WINTER GARDEN, FL 34787</b>	
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*please correct spelling of last name*

7. Name and Address of New Registered Agent Name <b>Tailon, Greg</b> Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD TAILLON, GREG 3105 W ORANGE COUNTRY CLUB DR WINTER GARDEN, FL 34787 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>D BAKER, LYMAN 3145 W. ORANGE COUNTRY CLUB ROAD WINTER GARDEN, FL 34787</del> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAPPAS, DEANE L 3225 W ORANGE COUNTRY CLUB DRIVE WINTER GARDEN, FL 34787 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GATTIS, CARL L 3113 W ORANGE COUNTRY CLUB DR WINTER GARDEN, FL 34787 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLACK, RUSSELL 3203 W ORANGE COUNTRY CLUB DR WINTER GARDEN, FL 34787 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lloyd Hart 3145 W. Orange CC Drive Winter Garden, FL 34787 <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  3/20/07 407-325-8593  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

407-877-0246