

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # N38114

1. Entity Name

WOODBROOK HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
552 HIGH OAKS COURT
TALLAHASSEE FL 32312
US

Mailing Address
552 HIGH OAKS COURT
TALLAHASSEE FL 32312
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3126868

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PERRIN, THOMAS
551 HIGH OAKS COURT
TALLAHASSEE FL 32312

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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 PD ☐ Delete
NAME PERRIN, THOMAS E
STREET ADDRESS 551 HIGH OAKS CT
CITY-ST-ZIP TALLAHASSEE FL

TITLE SD ☐ Delete
NAME PETRANDIS, ROSELLE C
STREET ADDRESS 552 HIGH OAKS CT
CITY-ST-ZIP TALLAHASSEE FL

TITLE D ☐ Delete
NAME MOORE, DAVID
STREET ADDRESS 526 RIVERPOND CT
CITY-ST-ZIP TALLAHASSEE FL 32312

TITLE D ☐ Delete
NAME HUGHES, JOSEPH
STREET ADDRESS 548 WOODFERN RD
CITY-ST-ZIP TALLAHASSEE FL 32316

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 1100000412202
CITY-ST-ZIP 02/10/06 80037-010 61.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.