

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40369

FILED  
Mar 20, 2009  
Secretary of State

**Entity Name:** WOODBRIDGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1961 WOODBRIDGE DR  
PENSACOLA, FL 32514 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 11361  
PENSACOLA, FL 325243611 US

**New Mailing Address:**

**FEI Number:** 59-3038134

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, STEVEN  
1953 WOODBRIDGE DR  
PENSACOLA, FL 32514 US

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

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: TD ( ) Delete  
Name: SEPULVEDA, BENNY  
Address: 1961 WOODBRIDGE DR  
City-St-Zip: PENSACOLA, FL 32514

Title: PD ( ) Delete  
Name: WILLIAMS, STEVEN  
Address: 1953 WOODBRIDGE DR  
City-St-Zip: PENSACOLA, FL 32514

Title: SD ( ) Delete  
Name: GUYAN, ANDY  
Address: 9817 BRIDGEWOOD LN  
City-St-Zip: PENSACOLA, FL 32514

**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:

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: STEVEN WILLIAMS

PD

03/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date