2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# N94000000548

Entity Name: MAYFAIR AT WOODFIELD, INC.

Current Principal Place of Business:

11784 W SAMPLE RD
STE 103
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

11784 W SAMPLE RD
STE 103
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 65-0650360 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED COMMUNITY MGT COPR
11784 W. SAMPLE RD #103
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

UNITED COMMUNITY MANAGEMENT CORP.
11784 W. SAMPLE RD #103
CORAL SPRINGS, FL 33065 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: RENEE CAMPBELL 03/30/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SPINNER, FELICE
Address: 4214 NW 60TH DR
City-St-Zip: BOCA RATON, FL 33496

Title: VP ( ) Delete
Name: SONDAK, ANDREA
Address: 4266 N.W. 62ND ROAD
City-St-Zip: BOCA RATON, FL 33496

Title: SD ( ) Delete
Name: BLUM, HAROLD
Address: 6263 N W43RD TERR
City-St-Zip: BOCA RATON, FL 33496

Title: TD ( ) Delete
Name: LEVINE, ROBERTA
Address: 4287 NW 61 LANE
City-St-Zip: BOCA RATON, FL 33496

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SPINNER, FELICE
Address: 4214 NW 60TH DR
City-St-Zip: BOCA RATON, FL 33496

Title: VPD (X) Change ( ) Addition
Name: SONDAK, ANDREA
Address: 4266 N.W. 62ND ROAD
City-St-Zip: BOCA RATON, FL 33496

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

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

Title: D ( ) Change (X) Addition
Name: RANDAZZA, JOSEPH R
Address: 6285 NW 42 WAY`
City-St-Zip: BOCA RATON, FL 33496

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: MARY LOU PALMER AGT 03/30/2009
Electronic Signature of Signing Officer or Director Date