

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000724

FILED
Mar 26, 2009
Secretary of State

Entity Name: THE OAKS AT WOODLAND PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

LIGHTHOUSE PROPERTY MGMT
16 CHURCH STREET
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

LIGHTHOUSE PROPERTY MGMT
16 CHURCH STREET
OSPREY, FL 34229

New Mailing Address:

FEI Number: 65-0938048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, CINDY
736 SHORECREST DRIVE
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

MILLAR, CINDY
736 SHORECREST DRIVE
SARASOTA, FL 34232 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: CINDY MILLAR

03/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MILLS, DAVID
Address: 711 CEDARCREST CT .
City-St-Zip: SARASOTA, FL 34232

Title: VP () Delete
Name: MIGONE, MILLER
Address: 771 AUTUMNCREST DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: S () Delete
Name: LINIGER, LLOYD
Address: 749 SHORE CREST DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: TR () Delete
Name: MILLAR, CINDY
Address: 736 SHORECREST DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Delete
Name: PURDY, KATHY
Address: 796 SHORECREST DRIVE
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MIGONE, MICHAEL
Address: 771 AUTUMNCREST DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: VP (X) Change () Addition
Name: PURDY, KATHY
Address: 796 SHORECREST DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Change () Addition
Name: GAUL, DAVID
Address: 743 STONECREST DRIVE
City-St-Zip: SARASOTA, FL 34232

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: CONNIE SALUTER

MGR

03/26/2009

Electronic Signature of Signing Officer or Director

Date