ANNUAL REPORT

DOCUMENT # N96000004305

1. Entity Name
WOODBURY PARK HOMEOWNERS ASSOCIATION, INC.



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

03-23-2007 90010 045 ****61.25

Principal Place of Business 118 N. WYMORE ROAD WINTER PARK, FL 32789 US		118	Mailing Address 118 N. WYMORE ROAD WINTER PARK, FL 32789 US			,							
2. Principal P	lace of Business - No P.O	. Box # 3. Ma	iling Address										
							WILLIAM STATE WATER	mater mares film	EM 1916 MANAGEM I ME				
Suite, Apt. #, etc.		Su	Suite, Apt. #, etc.			02272007 _{CI}	hg-NP	CR2E037	7 (12/06)				
City & State		Ci	City & State			4. FEI Number 59-343402	25			plied For ot Applicable			
Zip Country		Zi	Zip Co		5. Certificate of Status Desired S8.75 Additional Fee Required								
6. Name and Address of Current Regist						7. Name and Address of New Registered Agent							
HARA, ROBERT					Name								
% HARA MANAGEMENT, INC. 118 N. WYMORE ROAD				Street	Address (I	P.O. Box Number is I	Not Acceptable))					
WINTER F	PARK, FL 32789												
				City				FL	Zip Cod	е			
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.													
ino oongat	ions or registered agent.												
SIGNATURE .	· <u></u>									<u> </u>			
	Signature, typed or printed name of	registered agent and title if ap	plicable. (NOTE	: Registered Agent signa	sture required	f when reinstating)		DATE					
Filing Fee is \$61.25 Due by May 1, 2007			Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		ike check da Departi						
10.	OFFICE	RS AND DIRECTORS	-	11.	1	ADDITIONS/CHANG	ES TO OFFICER	S AND DIR	ECTORS IN	10			
TITLE	VD	.,	Delete	TITLE					☐ Change	☐ Addition			
NAME STREET ADDRESS	KENDRICK, TIFFANE 12609 PARKBURY DI			NAME Street address									
CRTY-ST-ZIP	ORLANDO, FL 32828			CITY-ST-ZIP									
TITLE,	PD		☐ Defete	TITLE				-	☐ Change	Addition			
NAME	SANTIAGO, LUIS			NAME	İ								
STREET ADDRESS CITY-ST-ZIP	12605 PARKBURY DE ORLANDO, FL 32828			STREET ADDRESS CITY-ST-ZIP									
TITLE	TD		☐ Delete		ļ <u>.</u>				Chagas	- Addition			
NAME	REINBECK, RANDY		L.J. Detete	TITLE NAME					Change	☐ Addition			
STREET ADDRESS	12746 PARKBURY DI	RIVE		STREET ADDRESS									
CITY-ST-ZIP	ORLANDO, FL 32828	<u> </u>		CITY-ST-ZIP									
TITLE	SD LUCO SABAH		🗷 Delete	TITLE	50	ورسوره الأواني			Change	Addition			
NAME STREET ADDRESS	LUGO, SARAH 12641 PARKBURY DI	RIVE		NAME STREET ADDRESS	$ \mathcal{M} _{\tilde{G}}$	helle Tys	bury DI	ive					
CITY-ST-ZIP	ORLANDO, FL 32828			CITY-ST-ZIP	CXI	ando Fl	3285	8					
TITLE	D		■ Delete	TITLE	1				☐ Change	Addition			
NAME	RAMIREZ, NELSON			NAME	mil	dred De	jesus	.		` `			
STREET ADDRESS CITY+ST+ZIP	12641 PARKBURY DF ORLANDO, FL 32828			STREET ADDRESS	120	dved De 113 Parkbi ando Fl	ury DYII	~ C~					
TITLE	ORDANDO, FL 32826			CITY-ST-ZIP	ort	ando FL	3386	18	П.О	- Address			
NAME			☐ Delete	TITLE NAME					Change	☐ Addition			
STREET ADDRESS				STREET ADDRESS									
CITY-ST-ZIP				CITY-ST-ZIP	<u></u>								
indicated of the cor	certify that the information s on this report or suppleme poration or the receiver or	intal report is true and trustee empowered to	accurate and that nexecute this report	ny signature shall as required by Ch	have the s	same legal effect as	if made under or	ath; that I ar	n an officer	or director			
changed,	or on an attachmen¶with a	an address, with all oth	ner like empowered.	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.									