

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004649

FILED
Feb 25, 2009
Secretary of State

Entity Name: WILLIAMSPORT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11621 YALDING DRIVE
JACKSONVILLE, FL 32223 US

New Principal Place of Business:

Current Mailing Address:

11621 YALDING DRIVE
JACKSONVILLE, FL 32223 US

New Mailing Address:

FEI Number: 59-3426807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODARD, FRANK
11621 YALDING DRIVE
JACKSONVILLE, FL 32223 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: P/D () Delete
Name: SHULTS, ART PRES
Address: 2432 IVY FORD LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: V/D () Delete
Name: GREENE, DAWN VP
Address: 2472 IVY FORD LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: S/D () Delete
Name: BOSTIC, WAYNE SECTY
Address: 2440 IVY FORD LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: T/D () Delete
Name: WOODARD, FRANK TREAS
Address: 11621 YALDING DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: LANE, IRENE S DIR
Address: 11629 YALDING DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: BOSTIC, WAYNE PRES
Address: 2440 IVY FORD LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: S/D (X) Change () Addition
Name: GREENE, DAWN SECRETA
Address: 2472 IVY FORD LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: V/D (X) Change () Addition
Name: STARS, LINDA VP
Address: 2464 IVY FORD LANE
City-St-Zip: JACKSONVILLE, FL 32223

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: F P WOODARD

TREA

02/25/2009

Electronic Signature of Signing Officer or Director

Date