

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000763

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: WOODRIDGE PHASE IIA HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

882 JACKSON AVE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

882 JACKSON AVE  
WINTER PARK, FL 32789

**New Mailing Address:**

FEI Number: 59-3472631      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MALCOM, THOMAS D  
882 JACKSON AVE  
WINTER PARK, FL 32789      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: PD ( ) Delete  
Name: ATKINS, ANGELA  
Address: 1045 WOODFLOWER WAY  
City-St-Zip: CLERMONT, FL 34711

Title: VP ( ) Delete  
Name: SEELMEYER, MIKE  
Address: 1123 WOODFLOWER WAY  
City-St-Zip: CLERMONT, FL 34711

Title: ST ( ) Delete  
Name: ANDERSON, SUE  
Address: 1110 WOODFLOWER WAY  
City-St-Zip: CLERMONT, FL 34711

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ESCOBAR, RAUL  
Address: 1052 WOODFLOWER WAY  
City-St-Zip: CLERMONT, FL 34711

Title: VP (X) Change ( ) Addition  
Name: GARCIA, IVETTE  
Address: 1102 WOODFLOWER WAY  
City-St-Zip: CLERMONT, FL 34711

Title: ST (X) Change ( ) Addition  
Name: MILLER, RANDALL  
Address: 1026 WOODFLOWER WAY  
City-St-Zip: CLERMONT, FL 34711

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: RAUL ESCOBAR

PD

03/31/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date