

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121326

FILED
Jan 26, 2009
Secretary of State

Entity Name: WOODBRIDGE HOLDINGS CORPORATION

Current Principal Place of Business:

2100 WEST CYPRESS CREEK ROAD
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

2100 WEST CYPRESS CREEK ROAD
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 11-3675068

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, ALISON W
150 W. FLAGLER STREET
MUSEUM TOWER, SUITE 2200
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

MILLER, ALISON W
STEARNS WEAVER MILLER
150 W. FLAGLER STREET, SUITE 2200
MIAMI, FL 33130 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:

01/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ABDO, JOHN E
Address: 2100 WEST CYPRESS CREEK ROAD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: CFO () Delete
Name: SCANLON, GEORGE P
Address: 2100 WEST CYPRESS CREEK ROAD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: CD () Delete
Name: LEVAN, ALAN B
Address: 2100 WEST CYPRESS CREEK ROAD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: P () Delete
Name: WISE, SETH
Address: 2100 WEST CYPRESS CREEK ROAD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D () Delete
Name: SCHERER, WILLIAM
Address: 2100 WEST CYPRESS CREEK ROAD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D () Delete
Name: BLOSSER, JAMES
Address: 2100 WEST CYPRESS CREEK ROAD
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CFO (X) Change () Addition
Name: GRELLE, JOHN
Address: 2100 WEST CYPRESS CREEK ROAD
City-St-Zip: FORT LAUDERDALE, FL 33309

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN GRELLE

CFO

01/26/2009

Electronic Signature of Signing Officer or Director

Date