

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733348

Entity Name: WOODLANDS ESTATES ASSOCIATION, INC.

Current Principal Place of Business:

720 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677

Current Mailing Address:

720 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677 US

FEI Number: 59-1679407

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCANNAVINO, INC.
720 BROOKER CREEK BLVD. #206
OLDSMAR, FL 34677 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VD
Name JABLONOWSKI, VALERIE
Address 720 BROOKER CREEK BLVD.
SUITE 206
City-State-Zip: OLDSMAR FL 34677

Title SD
Name FORD-KNABEL, KATHERINE
Address 720 BROOKER CREEK BLVD.
SUITE 206
City-State-Zip: OLDSMAR FL 34677

Title PD
Name BERRY, PAULA
Address 720 BROOKER CREEK BLVD.
SUITE 206
City-State-Zip: OLDSMAR FL 34677

Title TD
Name FARRIS, CYNTHIA
Address 720 BROOKER CREEK BLVD.
SUITE 206
City-State-Zip: OLDSMAR FL 34677

Title D
Name FOSBROOK, GEOFFREY
Address 720 BROOKER CREEK BLVD.
SUITE 206
City-State-Zip: OLDSMAR FL 34677

I hereby 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 all other like empowered.

SIGNATURE: PAULA BERRY

PRESIDENT

02/26/2015

Electronic Signature of Signing Officer/Director Detail

Date