

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735988

Entity Name: WOODLAND LAKES HOME OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5345 WOODLAND LAKES DRIVE
PALM BEACH GARDENS, FL 33418**Current Mailing Address:**5345 WOODLAND LAKES DRIVE
PALM BEACH GARDENS, FL 33418-3937**FEI Number:** 59-2072774**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILEY, WALT
5245 WOODLAND LAKES DR
PALM BEACH GARDENS, FL 33418 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	P
Name	GLASSMAN, BARRY
Address	5390 WOODLAND LAKES DR, #201
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	D
Name	MAZOYER, DELORES
Address	5350 WOODLAND LAKES DR #209
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	S
Name	IGLESIAS, TERE
Address	5225 WOODLAND LAKES DR
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	VP
Name	PEARLMAN, STANLEY
Address	5250 WOODLAND LAKES DR, #229
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	T
Name	WILEY, WALTER
Address	5245 WOODLAND LAKES DR
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	D
Name	STERNLIEB, HERB
Address	5180 WOODLAND LAKES DR
City-State-Zip:	PALM BEACH GARDENS FL 33418

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: WALTER WILEY**TREASURER****04/08/2015**

Electronic Signature of Signing Officer/Director Detail

Date