2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01629

Entity Name: WOODLAND GROVE CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 06, 2018
Secretary of State
CC2743461357

Current Principal Place of Business:

WOODLAND GROVE CONDOMINIUM ASSOCIATION 2477 STICKNEY PT. RD. SUITE 118A SARASOTA, FL 34231

Current Mailing Address:

WOODLAND GROVE CONDOMINIUM ASSOCIATION 2477 STICKNEY PT. RD. SUITE 118A SARASOTA, FL 34231 US

FEI Number: 59-2305326 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLLINS, PHIL WOODLAND GROVE CONDOMINIUM ASSOCIATION 2477 STICKNEY PT. RD. SUITE 118A SARASOTA, FL 34231 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: PHIL COLLINS 03/06/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VP Title P

Name SUTER, ERNIE Name SPRANKLE, FRED

Address WOODLAND GROVE CONDOMINIUM Address WOODLAND GROVE CONDOMINIUM

ASSOCIATION ASSOCIATION

2477 STICKNEY PT. RD. SUITE 118A 2477 STICKNEY PT. RD. SUITE 118A

City-State-Zip: SARASOTA FL 34231 City-State-Zip: SARASOTA FL 34231

Title D Title TD

Name COLLINS, PHIL SECRETARY Name TREMPE, BOB TREASURER

Address WOODLAND GROVE CONDOMINIUM Address WOODLAND GROVE CONDOMINIUM

ASSOCIATION ASSOCIATION
2477 STICKNEY PT. RD. SUITE 118A 2477 STICKNEY PT. RD. SUITE 118A

City-State-Zip: SARASOTA FL 34231 City-State-Zip: SARASOTA FL 34231

Title DIRECTOR Title DIRECTOR

Name DOMANICO, CHARLES DIRECTOR Name SCULLY, TOM DIRECTOR

Address WOODLAND GROVE CONDOMINIUM Address WOODLAND GROVE CONDOMINIUM

ASSOCIATION ASSOCIATION

2477 STICKNEY PT. RD. SUITE 118A 2477 STICKNEY PT. RD. SUITE 118A

City-State-Zip: SARASOTA FL 34231 City-State-Zip: SARASOTA FL 34231

Title S

Name TOSHNER, RON

Address WOODLAND GROVE CONDOMINIUM

ASSOCIATION

2477 STICKNEY PT. RD. SUITE 118A

City-State-Zip: SARASOTA FL 34231

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: PHIL COLLINS SECRETARY 03/06/2018