

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002759

Entity Name: AUBURN WOODS OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**181 CENTER ROAD
VENICE, FL 34285**Current Mailing Address:**181 CENTER ROAD
VENICE, FL 34285 US**FEI Number:** 02-0584403**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER ROAD
VENICE, FL 34285 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	PRESIDENT
Name	SUNDERLAND, MIKE
Address	181 CENTER ROAD
City-State-Zip:	VENICE FL 34285

Title	VP
Name	HARRIS, BOB
Address	181 CENTER ROAD
City-State-Zip:	VENICE FL 34285

Title	SECRETARY
Name	MALISH, ED
Address	181 CENTER ROAD
City-State-Zip:	VENICE FL 34285

Title	TREASURER
Name	BLAIR, DIANNE
Address	181 CENTER ROAD
City-State-Zip:	VENICE FL 34285

Title	DIRECTOR
Name	KELLY, WILDA
Address	181 CENTER ROAD
City-State-Zip:	VENICE FL 34285

Title	MANAGEMENT PRESIDENT
Name	O'GRADY, BARBARA L
Address	181 CENTER ROAD
City-State-Zip:	VENICE FL 34285

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: BARBARA O'GRADY**MGMT / PRES****02/26/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date