## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 03, 2006 8:00 am **DOCUMENT # 704057 Secretary of State** 1. Entity Name 03-03-2006 90119 043 \*\*\*\*61.25 WOODCREST ARMS INC Principal Place of Business Mailing Address 2500 E SAMPLE RD LIGHTHOUSE POINT FL 33064 2500 E SAMPLE RD LIGHTHOUSE POINT FL 33064 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-1035492 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RICHARDSON, THOMAS W Street Address (P.O. Box Number is Not Acceptable) 2500 E SAMPLE RD #10 LIGHTHOUSE: POINT FL 33064 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITEF Delete TITLE MARGARET RAHTJEN 2500 NE 36 ST #8 FRISKEY, JULIA NAME NAME 2500 NE 36 ST # 5 STREET ADDRESS STREET ADDRESS LIGHTHOUSE POINT FL 33064 33064 CITY - ST-ZIP CITY - ST - ZIP JOHTHOUSE POINT FL TITLE Delete TITLE Change Addition RICHARDSON, THOMAS NAME NAME 2500 NE 36 ST #10 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LIGHTHOUSE POINT FL 33064 CITY-ST-ZIP PID TITLE Delete. \_ TITLE M Change -- - E Addition -MARKWELL, WENDY NAME NAME 2500 NE 36 STREET #11 STREET ADDRESS STREET ADDRESS LIGHTHOUSE POINT FL 33064 CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change X Addition SUSAN ALLEN 2500 NE 36 STREET #7 CIPOLLA, DOMINIC NAME NAME STREET ADDRESS 2500 NE 36 ST #4 STREET ADDRESS FL 33064 LIGHTHOUSE POINT CITY-ST-ZIP LIGHTHOUSE POINT FL 33064 CITY-ST-ZIP VPD TETLE ☐ Delete TITLE SDChange ☐ Addition LEONE, THOMAS NAME NAME 2500 NE 36 ST #2 STREET ADDRESS STREET ADDRESS LIGHTHOUSE POINT FL 33064 CITY-ST-ZIP CITY-ST-ZIP $\Lambda$ 5JTITLE ☐ Delete ☐ Change **X** Addition Carolyn Furst 2500 ME 36 Street #1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LIGHTHOUSE POINT CITY-ST-ZIP 33064 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 it changed, or on an attachment with an additional finer like empowered.

WENDY MARYLIEL

**FILED** 

954-728-23-57