## 2003 NOT-FOR-PROFIT CORPORATION

LARGO FL 33770

3. Mailing Address

## UNIFORM BUSINESS REPORT (UBR **DOCUMENT # 729162** 1. Entity Name WOODLAKE ASSOCIATION, INC. Principal Place of Business Mailing Address C/O INFINITI PROPERTY MANAGEMENT. INC.

1301 SEMINOLE BLVD.. STE 110

2. Principal Place of Business

LARGO FL 33770

8.

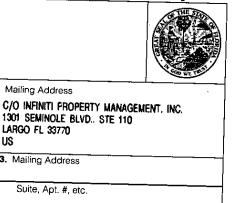
NAME

STREET ADDRESS

CITY-ST-ZIP

FILED Mar 03, 2003 8:00 am Secretary of State

03-03-2003 90442 021 \*\*\*\*61.25





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Suite, Apt. #, etc. City & State		Suite, Apt. #, etc. City & State		4. FEI Number 59-2023853 Applied For		
						Zip
	Nome and Add			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
6. Name and Address of Current Re		ent Registered Agent	ent 7. Name and Address of New Regi			
INFINITI PRO 1301 SEMINO LARGO FL 3:	PERTY MANAGEMENT INC. DLE BLVD., SUITE 110		I Name = 1	ss (P.O. Box Number is Not Acceptable)		
The above name	ed entity submits this statement of registered agent.	t for the purpose of changin	City g its registered office or regi	FL stered agent, or both, in the State of Florida. I am	Zip Code	
SNATURE					and docept	

SIC

Signature, typed or printed name of registered agent and title if app	olicable. (NOTE: Registered Agent signature require	red when reinstating)	DATE
FILE NOW: FEE IS \$61.25	9. Election Campaign Financing	\$5.00 May Bo	Make Check Psychia to

Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE **⊠** Delete P/DTITLE SCHOONMAKER, DENISE NAME Change **X** Addition NAME LACOGNATA, JENNIFER STREET ADDRESS 2054 SUNSET POINT RD #31 STREET ADDRESS 2062 SUNSET POINT RD., #62 CITY-ST-ZIP **CLEARWATER FL 33765** CITY-ST-ZIP CLEARWATER, FL 33765 TITLE TD ☐ Delete TITLE NAME SCHOENHERR, KENNETH **C**hange ☐ Addition NAME STREET ADDRESS 2057 SUNSET POINT ROAD, #24 STREET ADDRESS 1265 JASMINE LAKE DR. CITY-ST-ZIP **CLEARWATER FL 33756** CITY-ST-ZIP

TARPON SPRINGS, FL 34689 TITLE Delete TITLE NAME MORGAN, JAMES Change ☐ Addition NAME STREET ADDRESS 2066 SUNSET ROAD #94 STREET ADDRESS CITY-ST-ZIP **CLEARWATER FL 33765** CITY-ST-ZIP TITLE ☐ Delete TITLE BLACKWELL, MARCY NAME ☐ Change ☐ Addition NAME STREET ADDRESS 2070 SUNSET POINT ROAD, #114 STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33765 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an attachment with an address with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

☐ Change

☐ Addition