2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 754017

1. Entity Name

THE WOODLAND OWNERS ASSOCIATION, INC.

FILED
Feb 01, 2000 8:00 am
Secretary of State
02-01-2000 90027 013 ****61.25

Principal Place of Business	Mailing Address
P.O. BOX 2492 FORT PIERCE FL 34954	P.O. BOX 2492 FORT PIERCE FL 34954-2492

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2067635 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PRICE - KEMLAGE, DONNA 2516 SOUTH 19TH STREET BUILDING 1, OPT. 104 FORT PIERCE FL 34-9821	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP KELLY, JEANNE 1912 ROYAL PALM DR. FORT PIERCE FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CARLIN, ROBERT S 2516 S 19TH ST 102 FT. PIERCE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M DIXON, Steve 6602 Sebastian Rd. Fort Pierce, FL. 34982	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FEE, MARY K 1300 SEAWAY DR. A-4 FT PIERCE FL 34949	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT WILDER, JIM 2481 SOUTH LOOKOUT BOULEVARD PORT SAINT LUCIE FL 34984	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KITZMILLER, CHARLES 2516 South 19th St., Bldg. I, Apt. 108 Fort Pierce, FL. 34982	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP PRICE - KEMLAGE, DONNA 2516 SOUTH 19TH BUILDING 1, OPT 104 FORT PIERCE FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donna Price-Kemlage REQUIRED 01/20/00 (561)468-3948
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #