2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2004 8:00 am
Secretary of State
04-30-2004 90286 006 ****61.25

DOCUMENT # 754017

1. Entity Name

THE WOODLAND OWNERS ASSOCIATION, INC.

MOORE CR2E037 (11/03)

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

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 59-2728592 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PRICE - KEMLAGE, DONNA
2516 SOUTH 19TH STREET
BUILDING 1, OPT. 104
FORT PIERCE FL 34-9821

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent. OUR REGISTERED AGENT IS NOW: SARAH WORSHAM NALL, ESQ. CORNETT, GOODE & ASSOCIATES, P.A. P.O. BOX 66 STUART, FL. 34995 (772) 286-2990

SIGNATURE _____ DATE

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

FILE NOW: FEE IS $61.25
Due By May 1, 2004

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CARBONORE, JOHN M 2516 S. 19TH ST., BLDG. 1, APT. 106 FORT PIERCE FL 34982	☐ Delete	P/M/D CARBONARA (PLEASE CORRECT SPELLING) SAME	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD FEE, MARY K 1300 SEAWAY DR. A-4 FT PIERCE FL 34949	☐ Delete	SAME	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PAIGE-KEMLAGE, DONNA 2516 S. 19TH ST., BLDG. 1, APT. 104 FORT PIERCE FL 34982	☐ Delete	S/T PRICE-KEMLAGE (PLEASE CORRECT SPELLING) SAME	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FINNEY, SONJA 10960 PINE CREEK LANE PORT SAINT LUCIE FL 34986	☐ Delete	C SAME	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	C PAUL MC GUINNESS 1766 S.W. ALBERCA LA. PT. ST. LUCIE, FL 34953	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	C CAITLIN RAMSHAW 2516 S. 19TH ST., BLDG. I APT. 108 FT. PIERCE, FL. 34982	☐ 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.

SEE NEXT PAGE FOR ADDITIONAL INFORMATION

SIGNATURE: Donna Price-Kemlage, Secretary-WOA 04/28/04 (772) 462-6997

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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CONTINUED PAGE - 2-
Attachment
540471110

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4. FEI Number 59-2728592 ☐ 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

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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C JOYCE KLEJA 2517 S. 17TH ST., BLDG. III, APT. 106 FT. PIERCE, FL. 34982	☐ Change ☒ Addition
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