

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719336

Entity Name: WOODLAND LAKE PROPERTY OWNERS IMPROVEMENT ASSOCIATION, INC.

**FILED
Mar 27, 2017
Secretary of State
CC4560869684**

Current Principal Place of Business:

17 NORTH SUNSET BLVD.
GULF BREEZE, FL 32561

Current Mailing Address:

PO BOX 612
GULF BREEZE, FL 32562-0612

FEI Number: 59-3203394

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GEORGE, BONNIE
17 N. SUNSET BLVD.
GULF BREEZE, FL 32561 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: BONNIE GEORGE

03/27/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BROCK, ALLEN
Address 9 N. SUNSET DR.
City-State-Zip: GULF BREEZE FL 32561

Title DIRECTOR
Name MOORE, BROOKS
Address 11 N. SUNSET BLVD.
City-State-Zip: GULF BREEZE FL 32561

Title DIRECTOR
Name GEORGE, CHAD
Address 326 N. SUNSET BLVD.
City-State-Zip: GULF BREEZE FL 32561

Title DIRECTOR
Name TRAWICK, STEVE
Address 324 N. SUNSET BLVD.
City-State-Zip: GULF BREEZE FL 32561

Title DIRECTOR
Name SILLITER, EMILY
Address 10 HIGHPOINT DRIVE
City-State-Zip: GULF BREEZE FL

Title ST
Name GEORGE, BONNIE
Address 17 N. SUNSET BLVD.
City-State-Zip: GULF BREEZE FL 32561

Title PRESIDENT
Name CLARK, BILL
Address 60 HIGHPOINT DRIVE
City-State-Zip: GULF BREEZE FL 32561

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: BONNIE GEORGE

SECRETARY/TREASURER 03/27/2017

Electronic Signature of Signing Officer/Director Detail

Date