

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 754306

**Entity Name:** WOODLAKE ISLES, INC.**Current Principal Place of Business:**C/O REALMANAGE  
902 CLINT MOORE RD SUITE 110  
BOCA RATON, FL 33487**Current Mailing Address:**C/O REALMANAGE  
P O BOX 803555  
DALLAS, TX 75380 US**FEI Number:** 59-2084807**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FERRER LAW GROUP, PLLC.  
2137 N. COMMERCE PARKWAY  
WESTON, FL 33326 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:** LOURDES FERRER

03/14/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |  |
|-----------------|--|
| Title           | PRESIDENT                                      |
| Name            | MUZAC, DANIELLE                                |
| Address         | C/O REALMANAGE<br>902 CLINT MOORE RD SUITE 110 |
| City-State-Zip: | BOCA RATON FL 33487                            |

|                 |  |
|-----------------|--|
| Title           | SECRETARY                                      |
| Name            | TRAU, TERESA YODAR                             |
| Address         | C/O REALMANAGE<br>902 CLINT MOORE RD SUITE 110 |
| City-State-Zip: | BOCA RATON FL 33487                            |

|                 |  |
|-----------------|--|
| Title           | VP   |
| Name            | SMITH, BERTHA                                  |
| Address         | C/O REALMANAGE<br>902 CLINT MOORE RD SUITE 110 |
| City-State-Zip: | BOCA RATON FL 33487                            |

|                 |  |
|-----------------|--|
| Title           | SECRETARY                                      |
| Name            | HELIN, MARIANNA                                |
| Address         | C/O REALMANAGE<br>902 CLINT MOORE RD SUITE 110 |
| City-State-Zip: | BOCA RATON FL 33487                            |

*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:** DANIELLE MUZAC

PRESIDENT

03/14/2023

Electronic Signature of Signing Officer/Director Detail

Date