

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N0100000246

**Entity Name:** WOODLAND LAKES HOMEOWNER'S ASSOCIATION OF LAKE ALFRED, INC.

**FILED**  
**Apr 23, 2024**  
**Secretary of State**  
**0222684301CC**

**Current Principal Place of Business:**

1901 US HWY 17-92  
LOT 177  
LAKE ALFRED, FL 33850

**Current Mailing Address:**

1901 US HWY 17-92  
LOT 177  
LAKE ALFRED, FL 33850 US

**FEI Number: 59-3210366**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FLORES, ELIZABETH  
1901 HWY 17-92 LOT 45  
LAKE ALFRED, FL 33850 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: ELIZABETH FLORES**

**04/23/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           FLORES, ELIZABETH  
Address        1901 US HWY 17-92 LOT 45  
City-State-Zip: LAKE ALFRED FL 33850

Title           PRESIDENT  
Name           WEST, ERIC  
Address        1901 US HWY 17-92 LOT 105  
City-State-Zip: LAKE ALFRED FL 33850

Title           VP  
Name           JOHNSON, DONALD II  
Address        1901 US HWY 17-92 LOT 96  
City-State-Zip: LAKE ALFRED FL 33850

Title           ASSISTANT TREASURER  
Name           GARDNER, DAVID  
Address        1901 US HWY 17-92 LOT 83  
City-State-Zip: LAKE ALFRED FL 33850

Title           VP  
Name           KEPLER, KEITH  
Address        1901 US HWY 17-92 LOT 149  
City-State-Zip: LAKE ALFRED FL 33850

Title           SECRETARY  
Name           SIXTH, LUANNE  
Address        1901 US HWY 17-92 LOT 116  
City-State-Zip: LAKE ALFRED FL 33850

*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: ELIZABETH FLORES**

**TREASURER**

**04/23/2024**

Electronic Signature of Signing Officer/Director Detail

Date