

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000000246

**Entity Name:** WOODLAND LAKES HOMEOWNER'S ASSOCIATION OF LAKE ALFRED, INC.**FILED**  
**Apr 04, 2019**  
**Secretary of State**  
**1749425688CC****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:**MCCALLION, NEIL  
1901 HWY 17-92 LOT 101  
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: NEIL MCCALLION****04/04/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIRECTOR
Name	MCCALLION, NEIL
Address	1901 HWY 17-92 LOT 101
City-State-Zip:	LAKE ALFRED FL 33850

Title	T
Name	SAUVE, CHARLOTTE
Address	1901 US HWY 17-92 LOT 44
City-State-Zip:	LAKE ALFRED FL 33850

Title	PRESIDENT
Name	GOOD, ROGER
Address	1901 US HWY 17-92 LOT 85
City-State-Zip:	LAKE ALFRED FL 33850

Title	DIRECTOR
Name	HOUSER, DAVID
Address	1901 HWY 17-92 # 146
City-State-Zip:	LAKE ALFRED FL 33850

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

Title	VP
Name	NICHOLS, JAMES
Address	1901 HWY 17-92 # 144
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: CHARLOTTE SAUVE****T****04/04/2019**

Electronic Signature of Signing Officer/Director Detail

Date