

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 156838

Entity Name: WOODALLS INC

FILED  
Jan 25, 2007  
Secretary of State

## Current Principal Place of Business:

2121 NEW TAMPA HWY  
F3  
LAKELAND, FL 33815 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 541  
LAKELAND, FL 338020541 US

## New Mailing Address:

2121 NEW TAMPA HWY  
LAKELAND, FL 33815 US

FEI Number: 59-0593761

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CATHERINE CARRINGTON  
2121 NEW TAMPA HWY  
F3  
LAKELAND, FL 33815 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: METCALF, CHARLES N PRES.  
Address: 2121 NEW TAMPA HWY, F3  
City-St-Zip: LAKELAND, FL 33815

Title: VPD ( ) Delete  
Name: WOODALL, J.H. III  
Address: 5605 N. BAILEY RD  
City-St-Zip: PLANT CITY, FL 33565

Title: S/TD ( ) Delete  
Name: METCALF, LESLIE M  
Address: 5601 N BARLEY RD  
City-St-Zip: PLANT CITY, FL 33565

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: WOODALL, JOHN H III  
Address: 5605 N. BAILEY RD  
City-St-Zip: PLANT CITY, FL 33565

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES N. METCALF

PRES

01/25/2007

Electronic Signature of Signing Officer or Director

Date