2006 FOR PROFIT CORPORATION

May 09, 2006 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT # 164922** 05-09-2006 90065 047 ***150.00 1. Entity Name WOODCOCK-KOGER CORPORATION Principal Place of Business Mailing Address 910A 3RD ST. 910A 3RD ST. NEPTUNE BEACH, FL 32266 NEPTUNE BEACH, FL 32266 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05012006 CR2E034 (11/05) Chg-P City & State Applied For City & State 4. FEI Number 59-0643667 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PADGETT, DONALD A Street Address (P.O. Box Number is Not Acceptable) 910A 3RD ST NEPTUNE BEACH, FL 32266 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Change ■ Addition Delete KOGER, IRA M. NAME NAME STREET ADDRESS 910A 3RD ST STREET ADDRESS CITY-ST-ZIP NEPTUNE BEACH, FL 32266 CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition HORNE, FLORA B. NAME NAME STREET ADDRESS 910A 3RD ST STREET ADDRESS CITY-ST-ZIP NEPTUNE BEACH, FL 32266 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE PADGEIT, DONALD A NAME NAME STREET ADDRESS 910A 3RD ST STREET ADDRESS CITY-ST-ZIP NEPTUNE BEACH, FL 32266 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP me ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

904-249-1*77*6

FILED

K1/06