

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 452269

**FILED**  
**Oct 21, 2014**  
**Secretary of State**

**Entity Name:** WOODS COMPANY OF FORT LAUDERDALE, INC.

**Current Principal Place of Business:**

2585 G ROAD  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 926  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

**FEI Number:** 59-1568062

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOODS, JAMES B SR  
2585 G ROAD  
LOXAHATCHEE, FL 33470 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:** JAMES B WOODS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** WOODS, STANLEY  
**Address:** 2585 G ROAD  
**City-St-Zip:** LOXAHATCHEE, FL 33470

**Title:** S/T  
**Name:** WOODS, JAMES B SR  
**Address:** 2585 G ROAD  
**City-St-Zip:** LOXAHATCHEE, FL 33470

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JAMES B WOODS

S/T

10/21/2014

Electronic Signature of Signing Officer or Director

Date