

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 10, 2007 8:00 am
Secretary of State

05-10-2007 90030 010 ***150.00

DOCUMENT # **565220**

1. Entity Name
Woodlake Developments, Inc.



Principal Place of Business
**2706 YARMOUTH DRIVE
WELLINGTON, FL 33414 US**

Mailing Address
**2706 YARMOUTH DRIVE
WELLINGTON, FL 33414 US**



04252007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEE NUMBER
57-1781804

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**ALURA KALPLAN
2706 YARMOUTH DRIVE
WELLINGTON, FL 33414**

**DO NOT WRITE
IN THIS SPACE**

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 *Alura Kalplan* **4-28-07** DATE

Signature, typed or printed name of registered agent and the applicable (NOTE: Registered Agent signature required when renouncing)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD TARMO PURRE 2706 YARMOUTH DRIVE WELLINGTON, FL 33414
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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 record 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 affidavit with all other like empowered.

SIGNATURE: *T. Purre* **PRES OWNER** **4-28-07**
565-793-3282

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR