

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731343

FILED
Apr 01, 2008
Secretary of State

Entity Name: WOODS AND LAKES HOME AND PROPERTY OWNERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

5970 SE 158TH CT
RT2, 5970 S.E. 158TH CT.
OKLAWAHA, FL 32179

New Principal Place of Business:

Current Mailing Address:

5970 SE 158TH CT
RT2, 5970 S.E. 158TH CT.
OKLAWAHA, FL 32179

New Mailing Address:

FEI Number: 59-1710161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW, BARBARA A
5924 SE 168 CT
OCKLAWAHA, FL 32179 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HARRIS, MARTIN
Address: 6548 SE 159 CT.
City-St-Zip: OCKLAWAHA, FL 32179

Title: T () Delete
Name: LAW, BARBARA A
Address: 5924 SW 168 CT
City-St-Zip: OCKLAWAHA, FL 32179

Title: D () Delete
Name: CURRY, HAROLD
Address: 16360 SE 59 ST
City-St-Zip: OCKLAWAHA, FL 32179

Title: SE () Delete
Name: ROBBINS, STELLA
Address: 17350 SE 66ST
City-St-Zip: OCKLAWAHA, FL 32179

Title: D () Delete
Name: GILBERT, JAMES
Address: 6265 SE 158 CT
City-St-Zip: OCKLAWAHA, FL 32179

Title: D () Delete
Name: DIXON, LARRY
Address: 16945 SE 63 LANE
City-St-Zip: OCKLAWAHA, FL 32179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: CURRY, HAROLD
Address: 16360 SE 59 ST
City-St-Zip: OCKLAWAHA, FL 32179

Title: SE (X) Change () Addition
Name: BRANNON, CATHRYN A
Address: 5885 SE 169 CT
City-St-Zip: OCKLAWAHA, FL 32179

Title: D (X) Change () Addition
Name: KRAUSE, RICHARD
Address: 5991 SE 158 CT
City-St-Zip: OCKLAWAHA, FL 32179

Title: D (X) Change () Addition
Name: YOHO, MYRON
Address: 17294 SE 66 LANE
City-St-Zip: OCKLAWAHA, FL 32179

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA A. LAW

T

04/01/2008

Electronic Signature of Signing Officer or Director

Date