2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2001 8:00 am
Secretary of State
03-20-2001 90045 016 ****61.25

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DOCUMENT # 735988

1. Entity Name

WOODLAND LAKES HOME OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5345 WOODLAND LAKES DRIVE PALM BEACH GARDENS FL 33418-3937	5345 WOODLAND LAKES DRIVE PALM BEACH GARDENS FL 33418-3937

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2072774 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOGAN, MARY 5345 WOODLAND LAKES DR 33418EBACH GARDENS FL 33418	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MARTIN, ROY 5380 WOODLAND LAKES DR PALM BEACH GARDENS FL 33418	☐ Delete	PRES. DOUGLAS COOMER 5205 WOODLAND LK. DR P.B.G, FL. 33418	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP GRANEY, JACK 5380 WOODLAND LAKES DR PALM BEACH GARDENS FL	☐ Delete	VICE. PRES ROY MARTIN 5380 WOODLAND LK. DR #115 P.B.G, FL 33418	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AGNONE, FRANK 5250 WOODLAND LAKES DR PALM BEACH GARDENS FL 33418	☐ Delete	VICE PRES. JACK GRANEY 5380 WOODLAND LK. DR #315 P.B.G, FL. 33418	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T COOMER ~~COOMER~~, DOUGLAS 5205 WOODLAND LAKE DR. PALM BEACH GARDENS FL 33418	☐ Delete	SEC'Y PATTI CERAVOLO 5280 WOODLAND LK. DR P.B.G, FL 33418	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CERAVOLO ~~CERAVOLO~~, PATTI 5380 WOODLAND LAKES DR PALM BEACH GARDENS FL 33418	☐ Delete	TREAS MARLON WILCOX 5188 WOODLAND LK. DR #336 P.B.G, FL. 33418	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D IGLESIAS ~~IGLESIAS~~, TERRY 5225 WOODLAND LAKES DR PALM BEACH GARDENS FL 34418	☐ Delete	DIR. TERI IGLESIAS 5225 WOODLAND LK. DR P.B.G, FL 33418	☐ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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.

SIGNATURE: Roy D. Martin (SIGNATURE REQUIRED) Martin 1-12-01 561 626-9340
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #