2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2009
Secretary of State

DOCUMENT# 762335

Entity Name: WOODS AND LAKES WATER ASSOCIATION, INC.

Current Principal Place of Business:

17301 SE 67TH ST
OKLAWAHA, FL 32179

New Principal Place of Business:

Current Mailing Address:

17301 SE 67TH ST
OKLAWAHA, FL 32179

New Mailing Address:

FEI Number: 59-2179933 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLE, ARTHUR W
6610 SE 173RD CT
OKLAWAHA, 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: TSD ( ) Delete
Name: COLE, ARTHUR W
Address: 6610 SE 179TH CT
City-St-Zip: OCKLAWAHA, FL 32179

Title: D ( ) Delete
Name: TANCREDI, JAMES
Address: 17167 SE 66TH ST
City-St-Zip: OCKLAWAHA, FL

Title: D ( ) Delete
Name: GEE, EVELYN
Address: 6598 SE 173RD CT
City-St-Zip: OCKLAWAHA, FL

Title: P ( ) Delete
Name: HURTEAU, DUANE
Address: 6569 SE 174TH CT
City-St-Zip: OCKLAWAHA, FL 32179

Title: DVP ( ) Delete
Name: GANNON, MARTY,
Address: 6580 SE 173RD CT
City-St-Zip: OKLAWAHA, FL

Title: D ( ) Delete
Name: LANDRY, ROGER
Address: 17421 SE 67TH STREET
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: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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

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

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

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: ARTHUR W COLE TREA 01/18/2009
Electronic Signature of Signing Officer or Director — Date