## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000002468

Entity Name: WOOD AFFORDABLE HOUSING SOUTH, INC.

FILED Apr 14, 2006 Secretary of State

Current Pri	ncipal Place	of Business:	New Principal Place	New Principal Place of Business:	
1110 NORTHCHASE PARKWAY, SUITE 150 MARIETTA, GA 30067					
Current Ma	iling Addres	s:	New Mailing Addres	New Mailing Address:	
1110 NORT MARIETTA,		RKWAY, SUITE 150			
FEI Number: 3	36-4503525	FEI Number Applied For ( )	FEI Number Not Applicable()	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US					
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  Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
	P () DURKIN, WARR 885 BIRDS MILI MARIETTA, GA	L	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CEO () WOOD, LEONA 4 CANNON POII KEY LARGO, FI	NT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
	V () FELDER, BERN 2102 PRIORY C CHARLOTTE, N	COURT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () KNOBLER, IGAI 9575 BLANDFO ORLANDO, FL	RD ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ROCHE, MICHA	AKE HILLS EAST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST () MANUS, VICKI E 5015 MAGNOLI, ROSWELL, GA	A WALK	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BETH VOLLERO CAO 04/14/2006