

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000170

Entity Name: WOODS HOLDINGS, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

529 WASHINGTON ST
COLUMBUS, IN 47201

New Principal Place of Business:

1045 TIPTON LANE
COLUMBUS, IN 47201

Current Mailing Address:

529 WASHINGTON ST
COLUMBUS, IN 47201

New Mailing Address:

1045 TIPTON LANE
COLUMBUS, IN 47201

FEI Number: 35-2062782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODS, PHILLIP L
2702 MEDALIST LN
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

WOODS, PHILLIP L
2702 MEDALLIST LN
NAPLES, FL 34109 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:

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: WOODS, PHILLIP L
Address: 2702 MEDALIST LN
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: KIEL, TAMARA A WOODS-
Address: 1045 TIPTON LANE
City-St-Zip: COLUMBUS, IN 47201

Title: D () Delete
Name: JAQUESS, TINA
Address: 2781 CITRIS LAKE DR., I-203
City-St-Zip: NAPLES, FL 34109

Title: S () Delete
Name: GARBER, WILLIAM G
Address: 431 WASHINGTON ST
City-St-Zip: COLUMBUS, IN 47201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: WOODS, PHILLIP L
Address: 2702 MEDALLIST LN
City-St-Zip: NAPLES, FL 34109

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAMARA A. WOODS-KIEL

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date