

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001020

FILED
Apr 25, 2008
Secretary of State

Entity Name: WOODSIDE INTERNATIONAL LIMITED INCORPORATED

Current Principal Place of Business:

1 BEACH DR SE SUITE 220
ST PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

1 BEACH DR SE SUITE 220
ST PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 98-0497100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERGE, THOMAS C CPA
1 BEACH DR SE SUITE 220
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

POSKUS, SUSAN I CPA
1 BEACH DR SE SUITE 220
ST PETERSBURG, FL 33701 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: SUSAN I POSKUS, CPA

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDP () Delete
Name: LEONI, PIETRO
Address: 1 BEACH DR SE SUITE 220
City-St-Zip: ST PETERSBURG, FL 33701

Title: VP () Delete
Name: LEONI, PIETRO
Address: 1 BEACH DR SE SUITE 220
City-St-Zip: ST PETERSBURG, FL 33701

Title: DST () Delete
Name: LEONI, KATHLEEN
Address: 1 BEACH DR SE SUITE 220
City-St-Zip: ST PETERSBURG, FL 33701

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:

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: PIETRO LEONI

CDP

04/25/2008

Electronic Signature of Signing Officer or Director

Date