

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G79667

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: AMERICAN WOODLAND PROPERTIES, INC.

## Current Principal Place of Business:

2613 S.W. 81ST ST.  
GAINESVILLE, FL 32607 US

## New Principal Place of Business:

2613 S.W. 81ST ST.  
GAINESVILLE, FL 32608 US

## Current Mailing Address:

P O BOX 140907  
GAINESVILLE, FL 326140907 US

## New Mailing Address:

FEI Number: 59-2420116      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BEN CAMPEN  
2613 S.W. 81ST STREET  
GAINESVILLE, FL 32607 US

## Name and Address of New Registered Agent:

BEN CAMPEN  
2613 S.W. 81ST STREET  
GAINESVILLE, FL 32608 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:

01/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CAMPEN, BEN,  
Address: 5348 N.W. 9TH LANE  
City-St-Zip: GAINESVILLE, FL 32605

Title: VD ( ) Delete  
Name: CAMPEN, JOHN,  
Address: 2613 SW 81ST ST  
City-St-Zip: GAINESVILLE, FL 32607

Title: VD ( ) Delete  
Name: LAMB, JOHN J.,  
Address: 5408 NW 9TH LANE  
City-St-Zip: GAINESVILLE, FL 32605

Title: S ( ) Delete  
Name: HALL, SYLVIA H.,  
Address: P.O. BOX 194/NA  
City-St-Zip: WALDO, FL 32694

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition  
Name: CAMPEN, JOHN,  
Address: 2613 SW 81ST ST  
City-St-Zip: GAINESVILLE, FL 32608

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: JOHN CAMPEN

VD

01/19/2009

Electronic Signature of Signing Officer or Director

Date