FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H00310 (3)**

1. Corporation Name

WOODLAND LAKES HOMEOWNER'S ASSOCIATION OF HAINES CITY, INC.

Principal Place of Business	Mailing Address
5401 HWY 92W LOT 151 HAINES CITY FL 33844-6556	5410 HWY 17-92 W LOT 177 HAINES CITY FL 33844-6556 US

3. Date Incorporated or Qualified: **04/24/1984**

3a. Date of Last Report: **03/20/1995**

4. FEI Number: **59-2407116** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 5401 Hwy 17-92W #30	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

BERRY, ROCKWOOD
5401 HWY 17-92 W., LOT 151
HAINES CITY FL 33844

10. Name and Address of New Registered Agent

81 Name: William Oldenettel
82 Street Address (P.O. Box Number is Not Acceptable): 5401 HWY 17-92 W #30
83 ~~HAINES CITY FL 33844~~
84 City: Haines City FL 85 Zip Code: 33844

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: William Oldenettel — DATE: 3-14-96
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent Signature Required When Filed)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ REILLY, EDWARD 5401 HWY 17-92 W,LOT 57 HAINES CITY FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	VD REILLY, EDWARD	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ~~PORTER, ELAINE~~ ~~5401 HWY 17-92 W LOT 98~~ ~~HAINES CITY FL~~	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	PD William Oldenettel 5401 HWY 17-92 W #30 Haines City, FL 33844	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ~~MCGIBBON, MARGARET~~ ~~5401 HWY 17-92 W LOT 148~~ ~~HAINES CITY FL~~	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	TD Sylvia Furness 5401 US HWY 17-92 W. #45 Haines City FL 33844	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MINDALA, JULIA 5401 HWY 17-92 W LOT 114 HAINES CITY FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	~~SD~~	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ~~BERRY, ROCKWOOD~~ ~~5401 HWY 17-92 W LOT 151~~ HAINES CITY FL	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D Paul Williams 5401 HWY 17-92 W 138# Haines City FL 33844	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALBIN, ARTHUR 5401 WHY 17-92 W., #78 HAINES CITY FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D Donna Barnes 5401 HWY 17-92 W #5 Haines City FL 33844	☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sylvia Furness — 3/14/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)