

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2007 8:00 am
Secretary of State

04-04-2007 90187 030 ***150.00

DOCUMENT # K06262

1. Entity Name

WOODEN SHOE REALTY, INC.



Principal Place of Business

430 N. "G" STREET
LAKE WORTH FL 33460-2928

Mailing Address

430 N. "G" STREET
LAKE WORTH FL 33460-2928



2. Principal Place of Business - No P.O. Box #

316 Orange Tree Dr

3. Mailing Address

316 Orange Tree Dr

Suite, Apt. #, etc.

Apt B

Suite, Apt. #, etc.

Apt B

City & State

Atlanta FL

City & State

Atlanta FL

Zip

33462

Country

Palm Beach

Zip

33462

Country

Palm Beach

1st MOORE

CR2E034 (10/06)

4. FEI Number

65-0017282

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VANDERWOUDE, JAMES
430 NORTH G STREET
LAKE WORTH FL 33460

7. Name and Address of New Registered Agent

Name James VanderWoude

Street Address (P.O. Box Number is Not Acceptable)

316 Orange Tree Dr Apt B

Atlanta

City Atlanta

FL

Zip Code

33462

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP
PVT VANDERWOUDE, JAMES A 316 ORANGE TREE DR. LAKE WORTH FL 33462 ☐ Delete

TITLE NAME STREET ADDRESS CITY ST ZIP
SD VANDERWOUDE, JAMES A 316 ORANGE TREE DR. LAKE WORTH FL 33462 ☐ Delete

TITLE NAME STREET ADDRESS CITY ST ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY ST ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY ST ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY ST ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY ST ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY ST ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY ST ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY ST ZIP ☐ Change ☐ Addition

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TITLE NAME STREET ADDRESS CITY ST ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *James VanderWoude* PR James VanderWoude

3-6-07 (561) 762-7170

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #