

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K16676

FILED  
Apr 23, 2012  
Secretary of State

**Entity Name:** THE WOOD DEVELOPMENT COMPANY OF JACKSONVILLE

**Current Principal Place of Business:**

414 OLD HARD ROAD  
SUITE 502  
FLEMING ISLAND, FL 32003 US

**New Principal Place of Business:**

**Current Mailing Address:**

414 OLD HARD ROAD  
SUITE 502  
FLEMING ISLAND, FL 32003 US

**New Mailing Address:**

**FEI Number:** 59-2897401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WOOD, JAMES RICKY  
414 OLD HARD ROAD  
SUITE 502  
FLEMING ISLAND, FL 32003 US

**Name and Address of New Registered Agent:**

WOOD, JAMES RICKY  
414 OLD HARD ROAD  
SUITE 502  
FLEMING ISLAND, FL 32003 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: JAMES RICKY WOOD

04/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: WOOD, JAMES RICKY  
Address: 414 OLD HARD ROAD, SUITE 502  
City-St-Zip: FLEMING ISLAND, FL 32003

Title: V/S  
Name: WOOD, SUSAN D  
Address: 414 OLD HARD ROAD, SUITE 502  
City-St-Zip: FLEMING ISLAND, FL 32003

Title: T  
Name: EDWARDS, MABRY - JR  
Address: 414 OLD HARD ROAD, SUITE 502  
City-St-Zip: FLEMING ISLAND, FL 32003

I hereby 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 all other like empowered.

SIGNATURE: MABRY EDWARDS, JR., ITS CFO

CFO

04/23/2012

Electronic Signature of Signing Officer or Director

Date