

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018095

Entity Name: WOODLAKE INDUSTRIES, LLC

FILED
May 06, 2005
Secretary of State

Current Principal Place of Business:

15109 KESTRELRISE DRIVE
LITHIA, FL 33547

New Principal Place of Business:

Current Mailing Address:

15109 KESTRELRISE DRICE
LITHIA, FL 33547

New Mailing Address:

FEI Number: 54-2090829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WALKER, FRED A
15109 KESTRELRISE DRIVE
LITHIA, FL 33547 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: WALKER, FRED A MGR
Address: 15109 KESTRELRISE DRIVE
City-St-Zip: LITHIA, FL 33547 US

Title: MGRM () Delete
Name: BERTRAM, ROBERT B
Address: 3927 CORINTHIAN STREET
City-St-Zip: LAFAYETTE, IN 47909

Title: MGRM () Delete
Name: AMANN, DAVID M
Address: 1258 SCOTSLAND DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

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

Title: MGRM () Change (X) Addition
Name: MYERS, JEFFREY T
Address: 4375 EAST LAKE DEXTER DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID W. AMANN

MGRM

05/06/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date