

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2008 8:00 am
Secretary of State

05-19-2008 90040 039 ****70.00

DOCUMENT # N01000000246 1. Entity Name WOODLAND LAKES HOMEOWNER'S ASSOCIATION OF HAINES CITY, INC.			
Principal Place of Business 5401 US HWY 17-92 LOT 177 W. HAINES CITY, FL 33844-6519		Mailing Address 5401 US HWY 17-92 LOT 177 W. HAINES CITY, FL 33844-6519	
2. Principal Place of Business - No P.O. Box # 1901 US HWY 17-92 Suite, Apt. #, etc. LOT 177 City & State LAKE ALFRED, FL Zip 33850		3. Mailing Address 1901 US HWY 17-92 Suite, Apt. #, etc. LOT 177 City & State LAKE ALFRED, FL Zip 33850	
4. FEI Number 59-3210366		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TERENZIO, ROBERT T 1917 BOOTH CIR., SUITE 271 LONGWOOD, FL 32750		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P NAME ADAMS, LON STREET ADDRESS 1901 US HWY 17-92, BOX 177 CITY-ST-ZIP LAKE ALFRED, FL 33850	☒ Delete	TITLE PRESIDENT NAME HENRY WILCOX STREET ADDRESS 1901 US HWY 17-92, LOT 86 CITY-ST-ZIP LAKE ALFRED, FL 33850	☒ Change ☐ Addition
TITLE D NAME TILGHMAN, MAE STREET ADDRESS 1901 US HWY 17-92, BOX 177 CITY-ST-ZIP LAKE ALFRED, FL 33850	☐ Delete		☐ Change ☐ Addition
TITLE S NAME THOMPSON, BARBARA STREET ADDRESS 1901 US HWY 17-92, BOX 177 CITY-ST-ZIP LAKE ALFRED, FL 33850	☒ Delete	TITLE SECRETARY NAME JIM BEISNER STREET ADDRESS 1901 US HWY 17-92, LOT 106 CITY-ST-ZIP LAKE ALFRED, FL 33850	☐ Change ☐ Addition
TITLE D NAME KNOLL, ED STREET ADDRESS 5401 HWY 17-92 W 139 CITY-ST-ZIP HAINES CITY, FL 33844	☐ Delete		☐ Change ☐ Addition
TITLE T NAME WHITE, LEE STREET ADDRESS 5401 HWY 17-92 W 155 CITY-ST-ZIP HAINES CITY, FL 33844	☐ Delete		☐ Change ☐ Addition
TITLE D NAME LINDSEY, GEORGIA STREET ADDRESS 5401 HWY 17-92 W 157 CITY-ST-ZIP HAINES CITY, FL 33844	☐ Delete	TITLE Treasurer NAME Constance Crowder STREET ADDRESS 1901 US HWY 17-92, Lot 86 CITY-ST-ZIP LAKE ALFRED, FL 33850	☒ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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: <u>Constance J. Crowder</u> Constance J. Crowder 3/2/08 8636625226 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

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