

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001243

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: WOODVILLE KARST PLAIN PROJECT, INC.

## Current Principal Place of Business:

PO BOX 3031  
TALLAHASSEE, FL 32315

## New Principal Place of Business:

3909 RESERVE DR.  
APT 2311  
TALLAHASSEE, FL 32311

## Current Mailing Address:

PO BOX 3031  
TALLAHASSEE, FL 32315

## New Mailing Address:

FEI Number: 59-3729292      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WERNER, CHRISTOPHER  
3909 RESERVE DR.  
APT. 2311  
TALLAHASSEE, FL 32311 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

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: IRVINE, GEORGE  
Address: 924 LAVENDER CIRCLE  
City-St-Zip: WESTON, FL 33327

Title: VTD ( ) Delete  
Name: WERNER, CHRISTOPHER  
Address: 12053 CEDAR BLUFF  
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD ( ) Delete  
Name: KORITZ, TERENCE  
Address: 8262 ASHWORTH COURT  
City-St-Zip: JACKSONVILLE, FL 32256

Title: PCD ( ) Delete  
Name: MCKINLEY, CASEY  
Address: 615 SW 80TH DRIVE  
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete  
Name: JABLONSKI, JARROD  
Address: 7607 NW 29TH PLACE  
City-St-Zip: GAINESVILLE, FL 32606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER WERNER

VTD

01/17/2007

Electronic Signature of Signing Officer or Director

Date