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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -1 PM 12:13

DOCUMENT # N06030 (3)

1. Corporation Name

THE WOODLANDS AT KING'S LAKE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2253 ROYAL LANE NAPLES FL 33962	800 SEA GATE DR STE 202 NAPLES FL 33940 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/06/1984
3a. Date of Last Report: 06/14/1994
4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

GEORGE M. GALSTER
2253 ROYAL LANE
NAPLES FL 33962

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE		☐ Change ☐ Addition
NAME	GALSTER, GEORGE M.	1.2 NAME		
STREET ADDRESS	2253 ROYAL LN	1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP		
TITLE	DVP	2.1 TITLE	DP	☐ Change ☒ Addition
NAME	JONES, RICHARD	2.2 NAME	Jones Richard	
STREET ADDRESS	2269 ROYAL LANE	2.3 STREET ADDRESS	2269 Royal Lane	
CITY-ST-ZIP	NAPLES FL	2.4 CITY-ST-ZIP	Naples FL	
TITLE	DT	3.1 TITLE	DT	☒ Change ☐ Addition
NAME	GARLAND, BILL	3.2 NAME	Levin Leo	
STREET ADDRESS	2293 ROYAL LN	3.3 STREET ADDRESS	2229 Royal Lane	
CITY-ST-ZIP	NAPLES FL	3.4 CITY-ST-ZIP	Naples FL	
TITLE	DP	4.1 TITLE	DVP	☒ Change ☐ Addition
NAME	ROSIER, ROBERT	4.2 NAME	Smith Robert	
STREET ADDRESS	2285 ROYAL LN	4.3 STREET ADDRESS	2266 Royal Lane	
CITY-ST-ZIP	NAPLES FL	4.4 CITY-ST-ZIP	Naples FL	
TITLE	DS	5.1 TITLE		☐ Change ☐ Addition
NAME	PAJER, CRAIG	5.2 NAME		
STREET ADDRESS	2233 ROYAL LANE	5.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard D Jones 1-26-95 774-2370
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Richard D. Jones

00116007