

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 03 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONSDOCUMENT # N06030 (3)  
1. Corporation Name  
THE WOODLANDS AT KING'S LAKE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2253 ROYAL LANE  
NAPLES FL 33962800 SEA GATE DR  
STE 202  
NAPLES FL 34103-2809  
US3. Date Incorporated or Qualified  
11/06/19843a. Date of Last Report  
06/25/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes



No

## 9. Name and Address of Current Registered Agent

## 10. Name and Address of New Registered Agent

JONES, RICHARD D  
2269 ROYAL LANE  
NAPLES FL 33962

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

## 12. OFFICERS AND DIRECTORS

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	KLINE, DAVID	
STREET ADDRESS	2252 ROYAL LANE	
CITY - ST - ZIP	NAPLES FL	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	JONES, RICHARD	
STREET ADDRESS	2269 ROYAL LANE	
CITY - ST - ZIP	NAPLES FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	LEVIN, LEO	
STREET ADDRESS	2293 ROYAL LN	
CITY - ST - ZIP	NAPLES FL	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	SMITH, ROBERT	
STREET ADDRESS	2266 ROYAL LANE	
CITY - ST - ZIP	NAPLES FL	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	PAJER, CRAIG	
STREET ADDRESS	2233 ROYAL LANE	
CITY - ST - ZIP	NAPLES FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	DS Jerome Dansereau
5.3 STREET ADDRESS	2297 Royal Lane
5.4 CITY - ST - ZIP	Naples FL 34112
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing 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

Jan 24 1997

CR2E037 (9/96)