## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Jan 25, 2000 8:00 am Secretary of State DOCUMENT # N07741 1. Entity Name WOODLAND HERITAGE ORGANIZATION, INC. 01-25-2000 90040 021 \*\*\*\*61.25 Principal Place of Business Mailing Address 6010 UNITY PASS 6010 UNITY PASS **GROVELAND FL 34736** GROVELAND FL 34736-9640 80006780 3. Mailing Address 2. Principal Place of Business 6004 HERITAGE DR. Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-2530484 GROVELAND, 71. L Not Applicable OROVER \$8.75 Additional 5. Certificate of Status Desired AKE ワミん Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CARSWELL, MARIAN Street Address (P.O. Box Number is Not Acceptable) HERZIG, JOAN L **6010 UNITY PASS GROVELAND FL 34736** City GROVE LAND, 71. 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. A. CARSWELL Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Delete TITLE Addition TITLE RAY DR. NAME KEIRNS, RAY NAME HARRIS STREET ADDRESS **6003 HERITAGE DR** STREET ADDRESS 71. 34736 CITY-ST-ZIP CITY-ST-ZIP **GROVELAND FL 34736** VD ☐ Delete ☐ Change Addition TITLE NAME NORRITO, JOSEPH STREET ADDRESS STREET ADDRESS 3320 PIONEER CIRCLE CITY-ST-ZIP CITY-ST-ZIP GROVELAND FL 34736 Delete TITLE ☐ Change ☐ Addition TIT) F THOMPSON, MARY NAME NAME STREET ADDRESS STREET ADDRESS 5912 PEACEFUL PASS CITY-ST-ZIP CITY-ST-7IP **GROVELAND FL** TITLE ☐ Change ☐ Addition □ Delete TITLE SEAVER, CALVIN NAME NAME STREET ADDRESS STREET ADDRESS **5968 FREEDOM DRIVE** CITY-ST-ZIP CITY-ST-ZIP **GROVELAND FL 34736** ☐ Change ☐ Addition TITLE TITLE □ Delete PATRICK, GERTRUDE NAME NAME STREET ADDRESS STREET ADDRESS 6018 UNITY PASS CITY-ST-ZIP CITY-ST-ZIP **GROVELAND FL 34736** Change SD SD CARSWELL, MARIAN 6004 HERITAGE DR. ☐ Delete Addition TITLE HERZIG, JOAN NAME NAME STREET ADDRESS STREET ADDRESS 6010 UNITY PASS GROVELAND, 71. 34736 CITY-ST-ZIP CITY-ST-ZIP **GROVELAND FL 34736**

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/00

352-429-3028