


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007 8:00 am
Secretary of State

01-25-2007 90056 047 ****61.25

DOCUMENT # N07944	
1. Entity Name WOODLANDS ASSOCIATION, INC.	

Principal Place of Business 51 FOREST LANE EUSTIS, FL 32726	Mailing Address 51 FOREST LANE EUSTIS, FL 32726
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country
Zip	Country

01192007 Chg-NP CR2E037 (12/06)



4. FEI Number 59-2937905	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
TRASK, ALTA C. 18 FOREST LN EUSTIS, FL 32726		Name WARREN LENINGTON	
		Street Address (P.O. Box Number Is Not Acceptable)	
		13 FOREST LANE	
		City	Zip Code
		EUSTIS	FL 32726

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	WARREN LENINGTON <i>Warren Lenington</i>	DATE	1/23/07
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>		<small>DATE</small>	

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARPENTER, LARRY 21 FOREST LN EUSTIS, FL 32726 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCNAMARA, TODD 39 FOREST LANE EUSTIS, FL 32726 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	WARREN LENINGTON <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13 FOREST LANE EUSTIS FL 32726
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RICHERT, RICK 25 FOREST LANE EUSTIS, FL 32726 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TRASK, ALTA 18 FOREST LANE EUSTIS, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	LINDA BUCKENMYER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 FOREST LANE EUSTIS FL 32726
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEDUTO, PAT 47 FOREST LN EUSTIS, FL 32726 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SUSAN LANEY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 50 FOREST LANE EUSTIS, FL 32726
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:	WARREN LENINGTON <i>Warren Lenington</i>	DATE	1/23/07	352-357-3524
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>DATE</small>		<small>Daytime Phone #</small>