2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCUMENT # N08838



Apr 20, 2005 8:00 am Secretary of State 04-20-2005 90354 039 ****61.25

FILED

1. Entity Nam WOODLA INC.		EN CONDOMINIU	JM ASS	OCIATION,								
9031 TOWN CENTER PARKWAY 903			9031	ing Address 31 TOWN CENTER PARKWAY ADENTON, FL 34202				50040912				
2. Principal P	lace of Busin	ness	3. Maili	ng Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.					01072005	Chg-NP	CR2E	037 (10/03)	
City & State			City & State					4. FEI Number				Applied For Not Applicable
			Zip		untry	5. Certificate of Status Desired S8.75 Additional Fee Required						
	6. Name	and Address of Current	Registered	d Agent		<u> </u>		7. Name and A	Address of New	Registere	d Agent	
ADVANCE	D MCMT	OF CW/ EL INC				Name						
ADVANCED.MGMT OF.SW.EL, INC 9031 TOWN CENTER PARKWAY BRADENTON, FL 34202				·	Street Address (P.O. Box Number is Not Acceptable)							
						City				·F	Zip Co	de
				·		<u> </u>						
	tions of regist	y submits this statement for lered agent.		ise of changing its	register	ed Office of	i register	ed agent, or boar	i, iii tile State ():	riolida. Ta	iii iaitiiiai wiii	i, and accept
	Signature, typed	or printed name of registered agen	and title if appli	cable. (NOTI	E. Registere	ed Agent signati	beriuper eru	when reinstating)		DATE		
<i></i>	Filing Fe	e is \$61.25 Any 1, 2005	t and title if appli	9. Election Car Trust Fund (npaign F	inancing	ure required	\$5.00 May Be Added to Fees	Fi	Make che	ck payable artment of S	
10.	Filing Fe	e is \$61.25		9. Election Car	npaign F	inancing		\$5.00 May Be	Fi	Make che orlda Dep	ck payable artment of \$	State
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12. I 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 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 impowered 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:

SIGNATUR AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR