


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90460 036 \*\*\*\*61.25

<b>DOCUMENT # N27661</b> 1. Entity Name <b>WOODLAND BAYOU PROPERTY OWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>P.O. BOX 1422 SANTA ROSA BEACH, FL 32459</b>			Mailing Address <b>P.O. BOX 1422 SANTA ROSA BEACH, FL 32459</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-2913512</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>MEYER, RAYMOND F III %BAY WOOD REALTY 6715 W HIGHWAY 98 EAST SANTA ROSA BEACH, FL 32459</b>				7. Name and Address of New Registered Agent Name <b>Stephen D. Landry</b> Street Address (P.O. Box Number is Not Acceptable) <b>119 Woodland Bayou Drive</b> City <b>Santa Rosa Beach</b> <b>FL</b> Zip Code <b>32459</b>	
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 <b>Stephen D. Landry - President/Director</b> <b>Stephen D. Landry</b> <b>4-24-05</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing.)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD <b>MEYER, RAYMOND F III</b> <b>533 WOODLAND BAYOU DRIVE</b> <b>SANTA ROSA BEACH, FL 32459</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <b>RUPP, ED</b> <b>664 WOODLAND BAYOU DRIVE</b> <b>SANTA ROSA BEACH, FL 32459</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <b>LANDRY, STEPHEN D</b> <b>119 WOODLAND BAYOU DRIVE</b> <b>SANTA ROSA BEACH, FL 32459</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 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.					
<b>SIGNATURE: Stephen D. Landry</b> <b>Stephen D. Landry</b> <b>4-24-05</b> <b>850-267-8400</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					