

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004616

FILED  
Apr 23, 2009  
Secretary of State

**Entity Name:** THE WOODS, PHASE III HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

103 WOOD TRAIL  
PANAMA CITY, FL 32405 US

**New Principal Place of Business:**

304 WOOD TRAIL  
PANAMA CITY, FL 32405 US

**Current Mailing Address:**

103 WOOD TRAIL  
PANAMA CITY, FL 32405 US

**New Mailing Address:**

304 WOOD TRAIL  
PANAMA CITY, FL 32405 US

**FEI Number:** 59-3401097

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FANTASKI, JAMES  
103 WOOD TRAIL  
PANANMA CITY, FL 32405 US

**Name and Address of New Registered Agent:**

BAUMAN, RICHARD A  
304 WOOD TRAIL  
PANANMA CITY, FL 32405 US

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.

SIGNATURE: RICHARD A. BAUMAN

04/23/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: STALVEY, WAYNE  
Address: 100 WOOD TRAIL  
City-St-Zip: PANAMA CITY, FL 32405

Title: V ( ) Delete  
Name: COOLEY, RICHARD  
Address: 2800 WHISPERWOOD LANE  
City-St-Zip: PANAMA CITY, FL 32405

Title: S ( ) Delete  
Name: FANTASKI, JAMES  
Address: 103 WOOD TRAIL  
City-St-Zip: PANAMA CITY, FL 32405

Title: T ( ) Delete  
Name: BAUMAN, RICHARD  
Address: 404 WOOD TRAIL  
City-St-Zip: PANAMA CITY, FL 32405

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: HAAG, BARBARA  
Address: 404 WOOD TRAIL  
City-St-Zip: PANAMA CITY, FL 32405

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD A. BAUMAN

T

04/23/2009

Electronic Signature of Signing Officer or Director

Date