


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2007 8:00 am
Secretary of State

02-23-2007 90022 022 ****61.25

DOCUMENT # N97000004808	
1. Entity Name WOODLAND ESTATES HOMEOWNERS, INC.	

Principal Place of Business 602 WOODLAND ESTATES AVE. RUSKIN, FL 33570	Mailing Address 602 WOODLAND ESTATES AVE LOT 23 RUSKIN, FL 33570
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2. Principal Place of Business - No P.O. Box # 602 Woodland Estates Ave. Suite, Apt. #, etc.	3. Mailing Address 602 Woodland Estates Ave. Lot 20 Suite, Apt. #, etc.
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01232007 Chg-NP CR2E037 (12/06)

City & State Ruskin FL	City & State Ruskin FL	4. FEI Number 59-3491707	Applied For <input type="checkbox"/> Not Applicable
Zip 33570	Country U.S.	Zip 33570	Country U.S.

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

GINGRICH, CAROLYN
 602 WOODLAND ESTATES AVE
 LOT 13
 RUSKIN, FL 33570

7. Name and Address of New Registered Agent

Name: Reborah Meluin
 Street Address (P.O. Box Number is Not Acceptable): 602 Woodland Estates Ave. bt 20
 City: Ruskin FL Zip Code: 33570

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME PD DONNELLY, TOM	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 602 WOODLAND ESTATES #42	
CITY-ST-ZIP RUSKIN, FL 33570	
TITLE NAME VD BROOKS, RUSS	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 602 WOODLAND ESTATES #10	
CITY-ST-ZIP RUSKIN, FL 33570	
TITLE NAME SD EAKINS, ROSE	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 602 WOODLAND ESTATES AVE., #23	
CITY-ST-ZIP RUSKIN, FL 33570	
TITLE NAME TD GRUBER, HILDA	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 602 WOODLAND ESTATES AVE., 49	
CITY-ST-ZIP RUSKIN, FL 33570	
TITLE NAME D GARRETT, WILDA	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 602 WOODLAND ESTATES AVE., #40	
CITY-ST-ZIP RUSKIN, FL 33570	
TITLE NAME D HARRIS, HELEN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 602 WOODLAND ESTATES AVE. # 25	
CITY-ST-ZIP RUSKIN, FL 33570	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME P.D. FABER MARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 602 Woodland Estates #48	
CITY-ST-ZIP RUSKIN FL. 33570	
TITLE NAME V.P. FARAS JOHN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 602 Woodland Estates #22	
CITY-ST-ZIP RUSKIN FL. 33570	
TITLE NAME SIT Meluin Debbie	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 602 Woodland Estates #20	
CITY-ST-ZIP RUSKIN FL. 33570	
TITLE NAME D. Pepkowski VIRGINIA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 602 Woodland Estates #34	
CITY-ST-ZIP RUSKIN FL. 33570	
TITLE NAME D. Richard Don	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 602 Woodland Estates #2	
CITY-ST-ZIP RUSKIN FL. 33570	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	

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: Reborah Meluin Reborah Meluin 1-23-07 813-641-7876
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #