2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2007
Secretary of State

DOCUMENT# N99000001942

Entity Name: IOLA WOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 366
SAN ANTONIO, FL 335767201 US

New Principal Place of Business:

16350 IOLA WOODS TRAIL
DADE CITY, FL 33523 US

Current Mailing Address:

P.O. BOX 366
SAN ANTONIO, FL 335767201 US

New Mailing Address:

FEI Number: 59-3669047 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOLZAPFEL, SANDRA J
16350 IOLA WOODS TRAIL
DADE CITY, FL 33523 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PARHAM, RICHARD H
Address: 16441 IOLA WOODS TRAIL
City-St-Zip: DADE CITY, FL 33523

Title: SD ( ) Delete
Name: MICHELLE, MACKEY
Address: 16224 IOLA WOODS TRAIL
City-St-Zip: DADE CITY, FL 33523

Title: TD ( ) Delete
Name: HOLZAPFEL, SANDRA J
Address: 16350 IOLA WOODS TRAIL
City-St-Zip: DADE CITY, FL 33523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: SANDRA HOLZAPFEL TD 01/24/2007

Electronic Signature of Signing Officer or Director — Date