

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90111 043 ***150.00

DOCUMENT # P00000054454

1. Entity Name
THRU THE WOODS, INC.



Principal Place of Business
**5866 BAY PINES LAKE BOULEVARD
ST. PETERSBURG FL 33708**

Mailing Address
**5866 BAY PINES LAKE BOULEVARD
ST. PETERSBURG FL 33708**

2. Principal Place of Business
2807 67TH ST W
Suite, Apt. #, etc.

3. Mailing Address
2807 67TH ST W
Suite, Apt. #, etc.

City & State
BRADENTON, FL
Zip
34209

Country
USA

City & State
BRADENTON, FL
Zip
34209

Country
USA

4. FEI Number
59-3653256

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required



☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**WOODS, VICKI L
5866 BAY PINES LAKE BOULEVARD
ST. PETERSBURG FL-33708**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

2807 67TH ST W

City **BRADENTON**

FL

Zip Code
34209

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 *Vicki L. Woods*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/2/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **WOODS, VICKI L.**
CITY-ST-ZIP **5866 BAY PINES LAKE BOULEVARD
ST. PETERSBURG FL 33708**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2807 67TH ST W**
CITY-ST-ZIP **BRADENTON, FL 34209**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 empowered to execute this report as required by Chapter 607, 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: *Vicki L. Woods*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/2/03
Daytime Phone #

CR2E034 (10/02)