2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Feb 02, 2004 08:00 AM DOCUMENT # P03000113911 1. Entity Name **Secretary of State** WOODBURY PROPERTY MANAGEMENT INC. Principal Place of Business Mailing Address 1538 SERENITY CIRCLE 1538 SERENITY CIRCLE NAPLES FL 34110 US NAPLES FL 34110 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For Not Applicable Ζip Country Zıp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WOODBURY, WILLIAM L Street Address (P.O. Box Number is Not Acceptable) 1538 SERENITY CIRCLE NAPLES FL 34110 City Zip Code 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 regulared when reinstation) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition WOODBURY, MILARGOS NAME NAME STREET ADDRESS 1538 SERENITY CIRCLE STREET ADDRESS CITY-ST-ZIP NAPLES FL 34110 CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE ☐ Addition WOODBURY, WILLIAM L NAME NAME U000000027470 STREET ADDRESS 1538 SERENITY CIRCLE STREET ADDRESS 02/03/04-80048-019 150.00 CITY-ST-ZIP NAPLES FL 34110 CITY-ST-ZIP TITS F Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TIDE Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SY-ZIP

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 of 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: SIGNATURE AND THEO OF PRINTED NAME OF SIGNING OF FIGHT OF DIRECTOR

January 30, 2004 239-597-8437