

PO4000131444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

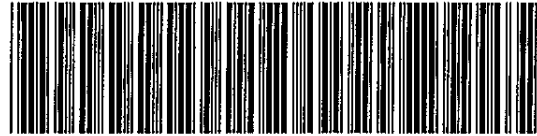
(Business Entity Name)

(Document Number)

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05 MAR 18 AM 9:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECORDED  
MAR 25 2005  
Dissmore

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** WOODLAND VILLAS & ASSOCIATES, INC.

**DOCUMENT NUMBER:** P04000131444

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROENA GOODE WINEBARGER

(Name of Person)

(Name of Firm/Company)

513 PALM AIRE DRIVE WEST

(Address)

POMPANO BEACH, FL 33069-5546

(City/State/and Zip Code)

For further information concerning this matter, please call:

ROENA GOODE WINEBARGER

(Name of Person)

at ( 954 ) 793-9617

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee     \$43.75 Filing Fee & Certificate of Status     \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)     \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: WOODLAND VILLAS & ASSOCIATES, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

c/o ROENA GOODE WINEBARGER

513 PALM AIRE DRIVE WEST

POMPANO BEACH, FL 33069-5546

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A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

ROENA GOODE WINEBARGER

Printed Name of the Person Filing

  
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00