2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000013483

Entity Name: CAROL MARIE WOODS, INC.

FILED Jan 07, 2008 Secretary of State

Current Principal Place of B	usiness:	New Principal Place of Business:
419 GREYFORD LANE CASSELBERRY, FL 32707	US	

Current Mailing Address: New Mailing Address:

419 GREYFORD LANE CASSELBERRY, FL 32707 US

FEI Number: 11-3768906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOODS, CAROL
419 GREYFORD LANE
CASSELBERRY, FL 32707 US

ALL FLORIDA FIRM INC
813 DELTONA BLVD
STE A
DELTONA, FL 32725 US

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: NOELLE KELLY 01/07/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 WOODS, CAROL
 Name:

 Address:
 419 GREYFORD LANE
 Address:

 City-St-Zip:
 CASSELBERRY, FL 32707 US
 City-St-Zip:

Title: VP (X) Delete Title: () Change () Addition
Name: HECK_ALBERT Name:

 Name:
 HECK, ALBERT
 Name:

 Address:
 419 GREYFORD LANE
 Address:

 City-St-Zip:
 CASSELBERRY, FL 32707 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL WOODS P 01/07/2008