

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000124607

FILED
Jan 06, 2012
Secretary of State

Entity Name: WOODWARD & ASSOCIATES, INC.

Current Principal Place of Business:

32 PINEWOOD DR.
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

32 PINEWOOD DR.
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 42-1746671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODWARD, DOUGLAS C MR.
32 PINEWOOD DR.
HAINES CITY, FL 33844 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: MR
Name: WOODWARD, DOUGLAS C
Address: 32 PINEWOOD DR.
City-St-Zip: HAINES CITY, FL 33844

Title: MR
Name: WOODWARD, DOUGLAS C
Address: 32 PINEWOOD DR.
City-St-Zip: HAINES CITY, FL 33844

Title: MR
Name: WOODWARD, DOUGLAS C
Address: 32 PINEWOOD DR.
City-St-Zip: HAINES CITY, FL 33844

Title: MR
Name: WOODWARD, DOUGLAS C
Address: 32 PINEWOOD DR.
City-St-Zip: HAINES CITY, FL 33844

Title: MR
Name: WOODWARD, DOUGLAS C
Address: 32 PINEWOOD DR.
City-St-Zip: HAINES CITY, FL 33844

Title: MR
Name: WOODWARD, DOUGLAS C
Address: 32 PINEWOOD DR.
City-St-Zip: HAINES CITY, FL 33844

I hereby 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 all other like empowered.

SIGNATURE: DOUGLAS C. WOODWARD

MR

01/06/2012

Electronic Signature of Signing Officer or Director

Date