## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000046693 (5)

## FILED Apr 30 1998 8:00am Secretary of State

WOODS CREEK PLANTATION, INC. Principal Place of Business Mailing Address 440 SO. JEFFERSON STREET 440 SO. JEFFERSON STREET MONTICELLO FL 32344 MONTICELLO FL 32344 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/22/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3342247 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zıp Zıp Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name ROWELL, RANDY B ESQ. 440 S. JEFFERSON ST. 82 Street Address (P.O. Box Number is Not Acceptable) MONTICELLO FL 32344 83 84 City 85 Zip Code 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stanature, typed or printed name of registered agent and little if applicable (NOTE Hogistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ Change DELETE Addition TITLE 1 1 TITLE ROWELL, RANDY 12 NAME NAME 440 SO. JEFFERSON STREET STREET ADDRESS 13 STREET ADDRESS MONTICELLO FL 32344 CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2. 4 CITY - ST-ZIP DETETE Change Addition TITLE 31 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CiTY-ST-ZIP DELFTE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS 4.4 CITY-ST-7IP CITY-S1-ZIP DELETE Change Addition 5.1 THLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6 1 TITLE NAME 62 NAME STREET ADDRESS 6 3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on mattachment with an address.

SIGNATURE:

- Randy Rowell

4-24-98 (860) 997-030/

ZE034 (10/97)