

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000093308

Entity Name: WOODLAND FIELD, INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

8236 MONCRIEF DINSMORE ROAD
JACKSONVILLE, FL 32219

New Principal Place of Business:

Current Mailing Address:

8236 MONCRIEF DINSMORE ROAD
JACKSONVILLE, FL 32219

New Mailing Address:

FEI Number: 59-3290604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE, HARRIETT
2438 GRAND STREET
JACKSONVILLE, FL 32208 US

Name and Address of New Registered Agent:

WALLACE, HARRIETT H
2438 GRANT STREET
JACKSONVILLE, FL 32208 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: HARRIETT H WALLACE

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WALLACE, HARRIETT H
Address: 2438 GRANT ST
City-St-Zip: JAX, FL 32208

Title: V (X) Delete
Name: WALLACE, NEPTUNE
Address: 2438 GRAND ST
City-St-Zip: JAX, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: HARRIETT H WALLACE

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

Date