FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90175 008 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000104511

1. Corpora ion Name

WOODLAND PROPERTIES, INC.

| Principal Plac | ee of Business | Mailing Address | | | | ┦ ''' | * # 16 # 10 # 10 10 # 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 | 1911) ME(E) ((D) | EBISI GIGGI ATI | 31 11001 1101 1001 |
|--------------------------------------------------------------------------------------|--------------------------------------------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------|--------------------|
| 1320 THOMAS | WOOD DRIVE | 1320 THOMASWOOD DRIVE | | | | | | | | |
| TALLAHASSEE FL 32312 | | TALLAHASSEE FL 32312 | TALLAHASSEE FL 32312 | | | 55.4157.445 | | 0.004.05 | | |
| | | | | | | 1 2 2 1 | DO NOT WE | | SPACE | |
| | | | | | | 1 | corporated or Qualife | 3 | | |
| | | To Maillian Address | | | | 4. FEI Nu | /1997 | | | App ied For |
| | Place of Business | 2a. Mailing Address | | | | 1 | 181818 | | | Not Applicable |
| 21 | 4 -1- | Suite, Apt. #, etc. | | | | 33-34 | 01010 | | | Additional |
| Suite, Apt. | . #, etc. | ⊢ | | | | 5. Certifca | ite of Status Desired | | • | Required |
| City & S' at | 10 | City & State | | | | 6 Floation | Campaign Financing | | | Nay Be |
| - | ie. | 28 | | | | | und Contribution | ' _□ | • | to Fees |
| 23 } Zip | Country | Zip | Coun | trv | | | rporation owes the cu | rrent vear in | | |
| 24 | 25 | — — · | 30 | , | | 1 | al Property Tax. | Trotte your | Yes | []No |
| | 9. Name and Address of Cur | | 30, | | | | and Address of New | Registere: | Agent | _ |
| | | | | B1 N | lame | | | | | |
| BF:Y | 'ANT, WILLIAM | | | | | | N | 4-1-1-1 | | |
| 815 | LAKE RIDGE RD | | 1 | B2 S | treet Addr | ress (P.U. Box | Number is Not Accep | лавеј | | |
| TAL | LAHASSEE FL 32312 | | - 1 | B3 | | | | | | |
| | | | | | | | | | | |
| | | | ' | B4 C | aty | | | FI | 85 Zip | Code |
| 11 Pursuant | to the provisions of Sections 607 | 0502 and 607.1508, Florida Statu | es, the ab | ove-na | amed com | oration submit | s this statement for th | e purpose | f changing if | ts registered |
| office or i | registered agent, or both, in the St | ate of Florida. Such change was อเ | uthorized | bv the | corporation | on's board of c | irectors. I hereby acc | ept the app: | ointment as r | egistered |
| agent. a | am tamiliar with, and accept the ob | ligations of, Section 607.0505, Flor | ida Statut | .62. | | | | | | |
| SIGNATURE | Signature, typed or printed nai he of registered | apent and title if applicable. (NOTL) | Registered A | agent sig | nature regu re | d when reinstating) | | DATE | | |
| 12. | | ANE DIRECTORS | 13. | | | | NS/CHANGES TO O | FFICERS / | ND DIRECT | OFS IN 12 |
| TITLE | Р | ☐ DELETE | 1.1 TITL | .E | | | | | Change | Addition |
| NAME | BRYANT, WILLIAM | | 1 2 NAM | Æ | | | | | | |
| STREET ADORE IS | ALE LAVE DIDOE DO | | 13 STR | EET AD | DRESS | | | | | |
| CITY-ST-ZIP | TALLAHASSEE FL 32312 | | 1.4 CITY | r-ST-ZII | , | | | | | |
| TITLE | VP | DELETE | 2.1 TITL | | | | | | | Addition |
| NAME | BRYANT, MARIANNE | | 2 2 NAM | 40 | Ì | | | | Change | |
| STREET ADDRESS | ALE LAKE DIDOE DO | | | | | | | | ☐ Change | |
| CiTY-ST-ZIP | TALLAHASSEE FL 32312 | | 2.3 STR | | DRESS | | | | ☐ Change | |
| TITLE | 17 this 0 to 0 to 0 to 1 to 0 to 1 to 1 | | 2.3 STR | EET AD | ì | | , | | ☐ Change | |
| NAME | | ☐ DELETE | 1 | EET ADI | ì | | | · | ☐ Change | → ☐ Addition |
| STREET ADDRESS | | ☐ DELETE | 2. 4 CIT | EET ADI Y-ST-Z E | ì | | | | | : Addition |
| CITY-ST-ZIP | | ☐ DELETE | 2. 4 C/T 3 1 T/TL 3.2 NAM | EET ADI Y-ST-Z E MÉ | P | | | | | : Addition |
| | | ☐ DELETE | 2. 4 CIT 3.1 TITL 3.2 NAM 3.3 STR | EET ADI Y-ST-Z E ME EET AD | P | | | | | : Addition |
| | 3 | ☐ DELETE | 2. 4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4. CIT | EET ADI Y-ST-Z E ME EEET AD Y-ST-Z | P | | | | | |
| TITLE | | | 2. 4 CIT 3.1 TITL 3.2 NAM 3.3 STR 3.4. CIT 4.1 TITL | EET ADI Y-ST-Z .E ME REET AD Y-ST-Z .E | P | | | | ☐ Change | |
| TITLE NAME | | | 2. 4 CIT 3 1 TITL 3.2 NAM 3.3 STR 3.4. CIT 4.1 TITL 4.2 NAJ | Y-ST-Z E ME REET AD Y-ST-Z E ME | P DRESS P | | | | ☐ Change | |
| TITLE NAME STREET ADDRE :S | | | 2.4 CIT 31 TITL 3.2 NAA 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAI 4.3 STR | EET ADI Y-ST-Z E ME EEET AD Y-ST-Z E ME | P DRESS | | | | ☐ Change | |
| TITLE NAME STREET ADDRE SS CITY-ST-ZIP | | ☐ DELETE | 2.4 CIT 31 TITL 3.2 NAA 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAI 4.3 STR 4.4 CIT | Y-ST-Z E ME EEET AD Y-ST-Z E ME EEET AD | P DRESS | | | | ☐ Change | e Addition |
| TITLE NAME STREET ADDRE SS CITY- ST- ZIP TITLE | | | 2. 4 CIT 31 TITL 3.2 NAA 3.3 STR 3.4. CIT 4.1 TITL 4.2 NAA 4.3 STR 4.4 CIT 5.1 TITL | EET ADI Y-ST-Z E ME EET AD Y-ST-Z E ME EET AD | P DRESS | | | | ☐ Change | e Addition |
| TITLE NAME STREET ADDRE S CITY-ST-ZIP TITLE NAME | | ☐ DELETE | 2.4 CIT 31 TITL 3.2 NAA 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAA 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAA | Y-ST-Z E ME EEET AD Y-ST-Z E ME EEET AD (-ST-ZII E | P DORESS P DORESS | | | | ☐ Change | e Addition |
| TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | ☐ DELETE | 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAV 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAN 5.3 STR | EET ADI Y-ST-Z E ME EET AD Y-ST-Z E ME EET AD Y-ST-Z E EET AD Y-ST-Z E EET AD | P DRESS P DRESS | | | | ☐ Change | e Addition |
| TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS CITY-ST-ZIP | | ☐ DELETE | 2.4 CIT 3.1 TITL 3.2 NAA 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAV 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAA 5.3 STR 5.4 CIT | EET ADI Y-ST-Z E ME REET AD Y-ST-Z E ME REET AD A REET AD Y-ST-Z REA AE AE AE AE AE AE AE AF AE | P DRESS P DRESS | | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | ☐ DELETE | 2.4 CIT 3.1 TITL 3.2 NAN 3.3 STR 3.4 CIT 4.1 TITL 4.2 NAV 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAN 5.3 STR | EET ADI Y-ST-Z E AE A | P DRESS P DRESS | | | | ☐ Change | Addition |

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the informat on 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 trustge empowered to execute this report as required by Chapte 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on a latech yent with an address, with a lother like empowered.

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP