2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

P98000007922 **DOCUMENT #**

1. Entity Name

THE WOODS AND HAHN AGENCY, INC.



FILED Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90663 036 ***150.00

Principal Place of Business 899 VANDERBILT BEACH ROAD SUITE 116 NAPLES FL 34108		899 Suit	Mailing Address 899 VANDERBILT BEACH ROAD SUITE 116 NAPLES FL 34108							
2. Principal Place of Business		3. Mai	3. Mailing Address				(
Suite, Apt. #, etc.		3	Suite, Apt. #, etc. Suite 103			CHECK HERE IF MAKING CHANGES				
City & Sta			& State			4 . F	El Number 65-0807575		opplied For	
Zip . Country		Zip				5. Certificate of Status Desired S8.75 Additional Fee Required			ditional	
	6. Name and Address	of Current Registere	ed Agent		······································	7. N	ame and Address of New Registere	ed Agent		
			Name							
	SHERRILL JR DERBILT BEACH ROAD		Street Address			s (P.O. Box Number is Not Acceptable)				
SUITE 11	6							· · · · · · · · · · · · · · · · · · ·		
NAPLES	FL 34108			City			F	Zip Cod	de	
8. The above	named entity submits this s	tatement for the purp	ose of changing its	s registered offic	e or registere	ed age	nt, or both, in the State of Florida. I a	m familiar with	, and accept	
_	tions of registered agent.	•								
SIGNATURE	Signature, typed or printed name of re	gistered agent and title if app	licable. (NO	TE: Registered Agent si	ignature required v	when rein	nstating) DATI	<u> </u>		
F	ILE NOW!!! FEE IS \$1	50.00								
Afte	May 1, 2003 Fee will be Payable to Florida Depa	\$550.00	f State			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.				
10.	OFF(CERS AND DIRECTO	RS	11.		ADE	DITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 11	
TITLE	D		☐ Delete	TITLE				Change	Addition	
NAME	WOODS, SHERRILL JR			NAME	goc.	. (-	1 1 2 2 2 2 2		_	
STREET ADDRESS	.899_VANDERBILT_BEAC	H_ROAD_STE_116		STREET ADDRE	ss 394 ·	99 Vanderbit Beach Road Ste 103				
CITY-ST-ZIP	NAPLES FL 34108			CITY-ST-ZIP						
TITLE	VD		☐ Delete	TITLE				Change	☐ Addition	
NAME	HAHN, JAMES	ULDD OTE 440		NAME	900	Van	iderbitt Beach Road	٠		
STREET ADDRESS CITY-ST-ZIP	899 VANDERBILT BEAC NAPLES FL 34108	H RD. SIE. 116		STREET ADDRE	SS 344	4 001 1	action seatty hoad	1 Stc 1	03	
TITLE -	TS			CITY-ST-ZIP					<u> </u>	
NAME	WOODS, NORMA		☐ Delete	TITLE NAME				Change	Addition	
STREET ADDRESS	889 VANDERBILT BEAC	H RD STE 116		STREET ADDRES	" lgaa ·	Var	iderbilk Beach Road	Ste 10	5.5	
CITY-ST-ZIP	NAPLES FL 34108	TIND. OIL. TIO		CITY-ST-ZIP	33 3 1 1	,			- 0	
TITLE .		**-	☐ Delete	TITLE						
NAME			L Delete	NAME				☐ Change	Addition Addition	
STREET ADDRESS				STREET ADDRES	ss					
CITY-ST-ZIP				CITY-ST-ZIP						
TITLE			☐ Delete	TITLE				☐ Change	Addition	
NAME				NAME						
STREET ADDRESS				STREET ADDRES	SS					
CITY-ST-ZIP				CITY-ST-ZIP						
TITLE			☐ Delete	TITLE				☐ Change	Addition	
NAME				NAME						
STREET ADDRESS City-St-Zip				STREET ADDRES	SS					
OTTA - OT - ZII'	**			CITY-ST-ZIP						

12. I hereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GELY JIRED NG OFFICER OR DIRECTOR