## 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 # P9800076970

1. Corporation Name
WOODART II, INC.

Principal Place of Business

1309 SE 5TH AVE CRYSTAL RIVER FL 34429 Mailing Address

1309 SE 5TH AVE CRYSTAL RIVER FL 34429

## FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90014 030 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

09/03/1998

<ol><li>Principal P</li></ol>	Place of Business 2a. Mailing Address				4. FEI Number			oplied For
21	26 P. O. Box 231				59-3530719			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
22		27	_		5. Odralozac of Casto Source		ee Re	equired
City & Stat	e	City & State			6. Election Campaign Financing			May Be
23	28 Lecanto, FL				Trust Fund Contribution		dded 1	to Fees
Zip	Country	Zip34460 _	Country		8. This corporation owes the current			_
24 25 29 34461-0231 30 C				us .	Personal Property Tax.	<b>3€</b> Y€		□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent	:	
			81	Name				
DLUHY, GEORGE J 1309 SE 5TH AVE CRYSTAL RIVER FL 34429				82 Street Address (P.O. Box Number is Not Acceptable)				
								ł
			-			85	Zip	Code
			84	City		FL  °°	Zip (	500e
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes.	the above	e-named corpo	oration submits this statement for the pu	rpose of chang	ing its	registered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was auth	ionzed by	tne corporatio	n's board of directors. I hereby accept the	ne appointmen	t as re	gistered
	m ramiliar with, and accept the obligat	ions of, Section 607.0505, Florid	a Statutes	•				ļ
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Ager	t signature required	when reinstating)	DATE	-	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIF	RECTO	ORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE				hange	☐ Addition
NAME	DLUHY, GEORGE J		1.2 NAME					
STREET ADDRESS	1309 SE 5TH AVE	•	1.3 STREET	ADDRESS				1
CITY-ST-ZIP	CRYSTAL RIVER FL 34429		1.4 CITY-S	T-7IP				
TITLE	01110171211112011120	☐ DELETE	2.1 TITLE				hange	Addition
NAME		_	2.2 NAME	İ				
STREET ADDRESS			2.3 STREE	ADDRESS				
			2.4 CITY-5	i			İ	- A-2 .
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE	11-215			hange	Addition
			3.2 NAME			_	Ī	
NAME			I -					
STREET ADDRESS			3.3 STREE					
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S 4.1 TITLE	T-ZIP			hange	Addition
TITLE			4.1 INLE 4.2 NAME			٠٠٠		
NAME						•		
STREET ADDRESS			4.3 STREE					
CITY-ST-ZIP		□ Del etc	4.4 CITY-S	r-ZIP		ПС	hange	Addition
TITLE		☐ DELETE	5.1 TITLE			<u>ښ</u>		
NAME			5.2 NAME			•	-	ļ
STREET ADDRESS			5.3 STREE					
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		V (mm)		□ A442*
TITLE		☐ DELETE	6.1 TITLE			Ü	Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	ADDRESS				
CITY-ST-ZIP			6.4 CITY-S	T-ZIP			$\perp$	
					to at the 440 07(2)(i) Elegade Statutes I fo	طف کانصمہ سمیانسہ	at tha	intermetion

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Scindicated on this annual report or supplemental annual report is true and accurate and that my signature officer or director of the corporation or the receiver or trustee empowered to execute this report as requestionable to the supplementation of the corporation of the corporation or the receiver or trustee empowered to execute this report as requestionable to the supplementation of t

119.07(3)(i), Florida Statutes. I further certify that the information in have the same legal effect as if made under oath; that I am an an y Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

George J. Dluhy

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