

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2007 8:00 am
Secretary of State

01-11-2007 90047 005 ***150.00

DOCUMENT # P98000076970

1. Entity Name
WOODART II, INC.



Principal Place of Business
**7 W LEMON ST
BEVERLY HILLS, FL 34465**

Mailing Address
**PO BOX 231
LECANTO, FL 34460-0231**

40001414



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

7 West Lemon Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Beverly Hills FL

Zip

Country

Zip
34465

Country
Citrus

01032007

Chg-P

CR2E034 (12/06)

4. FEI Number
59-3530719

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DLUHY, GEORGE J
1309 SE 5TH AVE
CRYSTAL RIVER, FL 34429**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
DLUHY, GEORGE J
1309 SE 5TH AVE
CRYSTAL RIVER, FL 34429**

☐ Delete

TITLE
NAME
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

George J. Dluhy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
GEORGE J. DLUHY, PRESIDENT

010407

352 746 4676

Date

Daytime Phone #