

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755082

Entity Name: WOODLAWN LAKES SUBDIVISION ASSOCIATES, INC.**Current Principal Place of Business:**8119 WOODLAWN CIR S
PALMETTO, FL 34221**Current Mailing Address:**P.O. BOX 1084
PALMETTO, FL 34220-1084 US**FEI Number:** 59-2072957**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MATSON, MICHAEL T
5110 WOODLAWN CIR E
PALMETTO, FL 34221 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:** MICHAEL T MATSON

03/21/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name COSTELLO, LUCY
Address 8119 WOODLAWN CIR S
City-State-Zip: PALMETTO FL 34221

Title VP
Name STINSON, DENNIS
Address 8207 OAK DR
City-State-Zip: PALMETTO FL 34221

Title SECRETARY
Name PALSGROVE, ELIZABETH
Address 8115 WOODLAWN CIR S
City-State-Zip: PALMETTO FL 34221

Title TREASURER
Name MATSON, MICHAEL T
Address 5110 WOODLAWN CIR E
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name BENSON, DONALD
Address 5205 WOODLAWN CIR W
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name SAUER, DELORES
Address 8106 LAKE DR
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name LUSK, KENNETH
Address 8002 OAK DR
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name DORSEY, LAURA
Address 8002 OAK DR
City-State-Zip: PALMETTO FL 34221

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL MATSON

TREASURER

03/21/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HERAS, WILLIAM
Address 8107 LAKE DR
City-State-Zip: PALMETTO FL 34221

Title DIRECTOR
Name CASE, EDWARD
Address 5104 WOODLAWN CIR E
City-State-Zip: PALMETTO FL 34221