2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2015
Secretary of State
CC7548003701

DOCUMENT# 553055

Entity Name: JOHN R. WOOD, INC.

Current Principal Place of Business:

9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34109

Current Mailing Address:

9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34109 US

FEI Number: 59-1782528

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOOD, PHILLIP R
9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34109 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PD
Name	WOOD, PHILLIP R
Address	9130 CORSEA DEL FONTANA WAY
City-State-Zip:	NAPLES FL 34109

Title	CD
Name	WOOD, JOHN R
Address	9130 CORSEA DEL FONTANA WAY
City-State-Zip:	NAPLES FL 34109

Title	CODS
Name	BABCOCK, DOROTHY D
Address	9130 CORSEA DEL FONTANA WAY
City-State-Zip:	NAPLES FL 34109

Title	AVP
Name	SCARTZ, JAMES
Address	3255 TAMIAMI TRAIL N.
City-State-Zip:	NAPLES FL 34103

Title	AVP
Name	HARRIS, MARIE
Address	3255 TAMIAMI TRAIL N.
City-State-Zip:	NAPLES FL 34103

Title	VP
Name	COBB, JERELYN J
Address	9130 CORSEA DEL FONTANA WAY
City-State-Zip:	NAPLES FL 34109

Title	VP
Name	PALMER TRAPASSO, JILL
Address	9130 CORSEA DEL FONTANA WAY
City-State-Zip:	NAPLES FL 34109

Title	AVP
Name	WEMPLE, WILLIAM W.
Address	9130 CORSEA DEL FONTANA WAY
City-State-Zip:	NAPLES FL 34109

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

SIGNATURE: PHILLIP R. WOOD PRESIDENT/DIRECTOR 03/31/2015

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title VP
Name MCCLOSKEY, COREY R.
Address 9130 CORSEA DEL FONTANA WAY
City-State-Zip: NAPLES FL 34109

Title VP
Name HAYNES, SPENCER E.
Address 3255 TAMIAMI TRAIL N.
City-State-Zip: NAPLES FL 34103

Title AVP
Name RICHARDSON, LISA M.
Address 3255 TAMIAMI TRAIL N.
City-State-Zip: NAPLES FL 34103

Title AVP
Name ROGERS, JILL
Address 3255 TAMIAMI TRAIL N.
City-State-Zip: NAPLES FL 34103

Title VP
Name THOMAS, DOREEN
Address 1185 IMMOKALEE ROAD, SUITE 300
City-State-Zip: NAPLES FL 34110

Title AVP
Name WALDENMAYER, CORINNE
Address 787 5TH AVENUE S.
City-State-Zip: NAPLES FL 34102

Title AVP
Name PERCEL, GEORGE A
Address 9130 CORSEA DEL FONTANA WAY
City-State-Zip: NAPLES FL 34109

Title AVP
Name BARDO, MARK
Address 9130 CORSEA DEL FONTANA WAY
City-State-Zip: NAPLES FL 34109

Title VP
Name MEASE, RODNEY F.
Address 3255 TAMIAMI TRAIL N.
City-State-Zip: NAPLES FL 34103

Title AVP
Name HARRIS, NORM G.
Address 3255 TAMIAMI TRAIL N.
City-State-Zip: NAPLES FL 34103

Title AVP
Name EARLS, WILLIAM H.
Address 3255 TAMIAMI TRAIL N.
City-State-Zip: NAPLES FL 34103

Title AVP
Name BATTEN, JEANNETTE
Address 3255 TAMIAMI TRAIL N.
City-State-Zip: NAPLES FL 34103

Title AVP
Name KRUESI, CINDY F.
Address 26269 TAMIAMI TRAIL S.
City-State-Zip: BONITA SPRINGS FL 34134

Title AVP
Name DEERING, CHERYL
Address 26269 TAMIAMI TRAIL S.
City-State-Zip: BONITA SPRINGS FL 34134

Title AVP
Name RIZK, LISA M.
Address 26269 TAMIAMI TRAIL S.
City-State-Zip: BONITA SPRINGS FL 34134