

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733947

FILED
Apr 13, 2007
Secretary of State

Entity Name: WILLOW LAKE ASSOCIATION OF KENNETH CITY, INC.

Current Principal Place of Business:

1799-B NORTH BELCHER RD.
SUITE B
CLEARWATER, FL 33765 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14357
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-2467947

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AMERI-TECH REALTY INC
1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P (X) Delete
Name: KEANE, SHEILA
Address: 6400 - 46TH AVENUE N #217
City-St-Zip: KENNETH CITY, FL 33709

Title: D () Delete
Name: NIZRIK, GARY
Address: 6210 SUN BLVD 306
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: PD () Delete
Name: URSO, DELORES
Address: 6400 - 46TH AVENUE N. #207
City-St-Zip: KENNETH CITY, FL 33709

Title: D () Delete
Name: KAHLE, MARTHA
Address: 6210 SUN BLVD 306
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: TD () Delete
Name: HYNES, MARIE JO
Address: 5400-46TH AVE #105
City-St-Zip: KENNETH CITY, FL 33709

Title: VPD () Delete
Name: LEAL, DENISE
Address: 5400-46TH AVE #305
City-St-Zip: KENNETH CITY, FL 33709

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: NIZRIK, GARY
Address: 6210 SUN BLVD 306
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HYNES, MARIE JO
Address: 5400-46TH AVE #105
City-St-Zip: KENNETH CITY, FL 33709

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DELORES URSO

PD

04/13/2007

Electronic Signature of Signing Officer or Director

Date