

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90014 010 ****61.25

DOCUMENT # 749614

1. Entity Name

WILLOWOOD GARDENS CONDOMINIUM ASSOCIATION, INC

Principal Place of Business

Mailing Address

6801 WILLOWOOD DR
 100
 BOCA RATON FL 33434-3531

6801 WILLOWOOD DR
 100
 BOCA RATON FL 33434-3531

614744



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1992700

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

ISAACSON, WILLIAM K.
5295 TOWN CENTER RD
STE 200
BOCA RATON FL 33486

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.

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 \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
VTD	KALMAN, HERBERT	6890 WILLOWOOD DR #203	BOCA RATON, FL 00000	<input checked="" type="checkbox"/>
D	SONYA GOLDMAN	6760 WILLOWOOD DRIVE, #1205	BOCA RATON FL	<input checked="" type="checkbox"/>
S	BRINDIS, LENORE	6696 WILLOWOOD DR #1704	BOCA RATON FL	<input type="checkbox"/>
D	COOPER, SELWYN	6696 WILLOWOOD DR #1701	BOCA RATON FL	<input type="checkbox"/>
PD	FRIEDMAN, MORTON	6826 WILLOWOOD DR. #707	BOCA RATON, FL 00000	<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
D	Rita Kingsley	6774 Willow Wood Drive #1102	Boca Raton, FL 33434	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Bernard Levine	6786 Willow Wood Dr. #1003	Boca Raton, FL 33434	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
Vice President/Treasurer				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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: *Morton Friedman* **MORTON FRIEDMAN** 1/30/01 561-483-7356
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)