2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# 760303

Entity Name: WILLOW WOODS TOWNHOUSE ASSOCIATION, INC.

Current Principal Place of Business:

TAM O' SHANTER BLVD.
N. LAUDERDALE, FL 33068 US

New Principal Place of Business:

Current Mailing Address:

C/O ABSOLUTE PROPERTY MANAGEMENT
541 S. ST. RD. 7, #12
MARGATE, FL 33068 US

New Mailing Address:

FEI Number: 59-2262537 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ABSOLUTE PROPERTY MANAGEMENT
541 S. ST. RD. 7
12
MARGATE, FL 33068 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:	SD	( ) Delete
Name:	BURGESS, TERRI	
Address:	7815 TAM O'SHANTER BLVD	
City-St-Zip:	N LAUDERDALE, FL 33068	
Title:	VP	( ) Delete
Name:	WHITE, PAULINE	
Address:	7915 TAM O SHANTER BLVD.	
City-St-Zip:	N. LAUDERDALE, FL 33068 US	
Title:	D	( ) Delete
Name:	MYERS, JOANNESE	
Address:	7933 TAM O SHANTER BLVD.	
City-St-Zip:	NORTH LAUDERDALE, FL 33068	
Title:	PD	( ) Delete
Name:	FRIEDMAN, LARRY	
Address:	7955 TAM-O-SHANTER BLVD	
City-St-Zip:	NORTH LAUDERDALE, FL 33068	
Title:	TD	(X) Delete
Name:	TRIOLO, TAMMIE	
Address:	7861 TAM O SHANTER	
City-St-Zip:	NORTH LAUDERDALE, FL 33068 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	T	(X) Change ( ) Addition
Name:	MYERS, JOANNESE	
Address:	7933 TAM O SHANTER BLVD.	
City-St-Zip:	NORTH LAUDERDALE, FL 33068	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify 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: LARRY FRIEDMAN P 04/30/2008

Electronic Signature of Signing Officer or Director — Date