2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N00000001521

1. Entity Name
WILLOW WALK PROPERTY OWNERS' ASSOCIATION, INC.

FILED
APR 16 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
11635 NORTHWEST 1ST AVENUE GAINESVILLE, FL 32607	11635 NORTHWEST 1ST AVENUE GAINESVILLE, FL 32607

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03292007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-3631143

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CURTIS, JOHN M SR.
11635 NORTHWEST 1ST AVENUE
GAINESVILLE, FL 32607

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CURTIS, JOHN M SR.
STREET ADDRESS	11635 NORTHWEST 1ST AVENUE
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	TD
NAME	CURTIS, GAIL W
STREET ADDRESS	11635 NORTHWEST 1ST AVENUE
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	D
NAME	STOKES, ANNE
STREET ADDRESS	315 N.W. 138 TERRACE, #100
CITY-ST-ZIP	JONESVILLE, FL 32669
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/08/07--01006--023 **70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: John M. Curtis President 3/30/2007 352-332-0838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #