

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005 8:00 am
Secretary of State

04-15-2005 90102 001 ****61.25


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01312005 No Chg-NP CR2E037 (10/03)

DOCUMENT # N00000005044

1. Entity Name
 WILLOW STREET PROPERTIES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 402 A. WILLOW AVE TAMPA, FL 33606	Mailing Address P.O. BOX 173071 TAMPA, FL 33672
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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3749494	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TALLEY, PAMELA CAROLE SANZERI
 402 A WILLOW AVE 404C S WILLOW AVE
 TAMPA, FL 33606

DO NOT WRITE IN THIS SPACE

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: *Carole Sanzeri* DATE: 4/5/05

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, 2005**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TALLEY, PAMELA CAROLE SANZERI 402 A S. WILLOW AVENUE 404C TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEWIS, JAMES H PAMELA TALLOV 404A S WILLOW AVENUE 402A TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RENAUD, RICHARD JOANNA STAHLMAN 404 B S WILLOW AVENUE 400A TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: *Carole Sanzeri* DATE: 4/5/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR