

# 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # N03000009547</b> 1. Entity Name WILLOW CREEK AT SEVEN OAKS ASSOCIATION, INC.					
Principal Place of Business 4131 GUNN HWY. TAMPA, FL 33618			Mailing Address		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		4. FEI Number <b>13-4275840</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
\$8.75 Additional Fee Required				07062006 Chg-NP CR2E037 (4/06)	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SCHLOSSER, RICHARD A 500 E. KENNEDY BLVD., SUITE 200 TAMPA, FL 33602			Name John Conley, P.A. Street Address The Belcher Commons 50 S. Belcher Road, Suite 123 Clearwater, FL 33765 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <i>John Conley, Esq.</i>		Signature, typed or printed name of registered agent and fee if applicable.		(NOTE: Registered Agent signature required when reinstating)	
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CROSBY, PETE 3254 CHAPEL CREEK CIR WESLEY CHAPEL, FL 33543	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRIS, JIM 3244 CHAPEL CREEK CIR WESLEY CHAPEL, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HARROD, CLEM 3336 CHAPEL CREEK DR WESLEY CHAPEL, FL 33543	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SPINDLE, DALE 3318 CHAPEL CREEK CIR WESLEY CHAPEL, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LEWIS, ROBERT 3440 CHAPEL CREEK CIR WESLEY CHAPEL, FL 33543	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LEWIS, ROBERT 3440 CHAPEL CREEK CIR WESLEY CHAPEL, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>Pete Crosby, Pres.</i>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 7/19/2006	
813-994-4840		Daytime Phone #		900078760078 08/16/06--01011--022 **\$61.25	

*PC/SL*