

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Mar 27, 2007
Secretary of State**

DOCUMENT# N06000007701

Entity Name: WILLOW RIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:9456 PHILIPS HWY, SUITE 1
JACKSONVILLE, FL 32256 US**New Principal Place of Business:****Current Mailing Address:**9456 PHILIPS HWY, SUITE 1
JACKSONVILLE, FL 32256 US**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:PRIOR, BETHANY
9456 PHILIPS HWY, SUITE 1
JACKSONVILLE, FL 32256 US**Name and Address of New Registered Agent:**DEARING, MARK C
9456 PHILIPS HWY, SUITE 1
JACKSONVILLE, FL 32256 US

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: MARK C. DEARING, REGISTERED AGENT

03/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DP () Delete
Name: ZAKOSKE, JOHN
Address: 9456 PHILIPS HWY, SUITE 1
City-St-Zip: JACKSONVILLE, FL 32256 USTitle: DVP () Delete
Name: DEARING, MARK C
Address: 9456 PHILIPS HWY, SUITE 1
City-St-Zip: JACKSONVILLE, FL 32256 USTitle: DST () Delete
Name: PRIOR, BETHANY
Address: 9456 PHILIPS HWY, SUITE 1
City-St-Zip: JACKSONVILLE, FL 32256 USTitle: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: DST (X) Change () Addition
Name: PORTER, ROBERT
Address: 9456 PHILIPS HWY, SUITE 1
City-St-Zip: JACKSONVILLE, FL 32256 USTitle: DAST () Change (X) Addition
Name: RESTALL, SHELBY R
Address: 9456 PHILIPS HIGHWAY, SUITE 1
City-St-Zip: JACKSONVILLE, FL 32256 USTitle: DAST () Change (X) Addition
Name: KNOX, LINNETTE C
Address: 9456 PHILIPS HIGHWAY, SUITE 1
City-St-Zip: JACKSONVILLE, FL 32256 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN ZAKOSKE, PRESIDENT

P

03/27/2007

Electronic Signature of Signing Officer or Director

Date