

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 11, 2009  
Secretary of State**

DOCUMENT# N95000005877

Entity Name: WILLOW POINTE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

7300 S.W. 80 COURT  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

7300 S.W. 80 COURT  
MIAMI, FL 33143

**New Mailing Address:**

FEI Number: 65-0610080      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THOMSON, JOHN M  
370 MINORCA AVENUE  
SUITE ONE  
CORAL GABLES, FL 33134 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: P ( ) Delete  
Name: LLOSENT, ED  
Address: 7350 S W 80 CT  
City-St-Zip: MIAMI, FL 33143

Title: ST ( ) Delete  
Name: MACHADO, MIRIAM  
Address: 7200 S.W. 80 COURT  
City-St-Zip: MIAMI, FL 33143

Title: TD ( ) Delete  
Name: TOMAS, FRANCINE  
Address: 7300 S.W. 80 COURT  
City-St-Zip: MIAMI, FL 33143

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: FRANCINE TOMAS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MRS.

03/11/2009

\_\_\_\_\_  
Date