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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N11644

1. Corporation Name

THE GARDENS OF WILLOW BEND III CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

3825 MEED DR.
LAKE WORTH FL 33467
US

Mailing Address

3825 MEED DR.
LAKE WORTH FL 33467-3119



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

10/17/1985

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-2622442

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 Zip Country

29 Zip Country

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

LEVIN, RUTH
7915 WILLOW SPRING DR
LAKE WORTH FL 33467

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TD ☒ DELETE

NAME WEINER, RUTH
STREET ADDRESS 7891 WILLOW SPRING DR
CITY-ST-ZIP LAKE WORTH FL 33467

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TD SELMA FROST ☒ Change ☐ Addition

7916 WILLOW SPRING DR
LAKE WORTH, FL 33467

TITLE S ☐ DELETE

NAME LANG, ELLIOT
STREET ADDRESS 7926 WILLOW SPRING DR
CITY-ST-ZIP LAKE WORTH FL 33467

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VP ☐ DELETE

NAME SASSIN, JERRY
STREET ADDRESS 7915 WILLOW SPRING DR
CITY-ST-ZIP LAKE WORTH FL 33467

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE PD ☐ DELETE

NAME LEVIN, RUTH
STREET ADDRESS 7915 WILLOW SPRING
CITY-ST-ZIP LAKE WORTH FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VP ☒ DELETE

NAME GOLDBERG, IRVING
STREET ADDRESS 7903 WILLOW SPRING DR
CITY-ST-ZIP LAKE WORTH FL

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

VP NORMAN FROST ☒ Change ☐ Addition

7916 WILLOW SPRING DR
LAKE WORTH, FL 33467

TITLE D ☐ DELETE

NAME JASPER, WILLIAM
STREET ADDRESS 7903 WILLOW SPRING DR
CITY-ST-ZIP LAKE WORTH FL

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ✓

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

✓ 3/4/99 561-964-3563

CR2E037 (1/98)