

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2004 8:00 am
Secretary of State

02-27-2004 90024 035 ****61.25

DOCUMENT # N11644

1. Entity Name
**THE GARDENS OF WILLOW BEND III CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
3825 MEED DR.
LAKE WORTH, FL 33467 US

Mailing Address
4000 S 57TH AVE
101
LAKE WORTH, FL 33463

94021266



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01062004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-2622442

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEVIN, RUTH
7915 WILLOW SPRING DR
#1213
LAKE WORTH, FL 33467

7. Name and Address of New Registered Agent

Name

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: SEC
NAME: DOYLE, MILTON ☒ Delete
STREET ADDRESS: 7928 WILLOW SPRINGS DR. #1312
CITY-ST-ZIP: LAKE WORTH, FL 33467

TITLE: T ☐ Delete
NAME: IERVOLINA, BETTY
STREET ADDRESS: 7926 WILLOW SPRING DR. #1311
CITY-ST-ZIP: LAKE WORTH, FL 33467

TITLE: D ☐ Delete
NAME: STEIN, ETHEL
STREET ADDRESS: 7892 WILLOW SPRING DR. #1517
CITY-ST-ZIP: LAKE WORTH, FL 33467

TITLE: PD ☐ Delete
NAME: LEVIN, RUTH
STREET ADDRESS: 7915 WILLOW SPRING #1213
CITY-ST-ZIP: LAKE WORTH, FL 33467

TITLE: D ☒ Delete
NAME: JASPER, WILLIAM
STREET ADDRESS: 7903 WILLOW SPRING DR. #1115
CITY-ST-ZIP: LAKE WORTH, FL 33467

TITLE: D ☐ Delete
NAME: ANTHONY, MICHAEL
STREET ADDRESS: 7892 WILLOW SPRING DR. #1513
CITY-ST-ZIP: LAKE WORTH, FL 33467

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☒ Change ☒ Addition
NAME: DOYLE, ELAINE
STREET ADDRESS: 7928 WILLOW SPRINGS DR. #1312
CITY-ST-ZIP: LAKE WORTH, FL 33467

TITLE: ☐ Change ☒ Addition
NAME: GLORIS, CLAIRE
STREET ADDRESS: 7928 WILLOW SPRINGS DR. #1014
CITY-ST-ZIP: LAKE WORTH, FL 33467

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☒ Addition
NAME: FARBER, HAROLD
STREET ADDRESS: 7928 WILLOW SPRINGS DR. #1216
CITY-ST-ZIP: LAKE WORTH, FL 33467

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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: Ruth Levin - RUTH LEVIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/04
Date

561-964-3563
Daytime Phone #