2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008
Secretary of State

DOCUMENT# N99000003229

Entity Name: LAVENTANA AT WILLOW POND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-3580799 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT, INC.
2180 WEST SR 434, STE. 5000
LONGWOOD, FL 327795044 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:	VPD	( ) Delete
Name:	MARKOWITZ, SHERMAN	
Address:	728 WHISPERING CYPRESS LN	
City-St-Zip:	ORLANDO, FL 32824	
Title:	SD	( ) Delete
Name:	MARTINEZ, DANIEL	
Address:	1033 RAINING MEADOWS LN	
City-St-Zip:	ORLANDO, FL 32824	
Title:	TD	( ) Delete
Name:	VALENTINE, TERESA	
Address:	14000 FAIRWINDS CT	
City-St-Zip:	ORLANDO, FL 32824	
Title:	PD	(X) Delete
Name:	ESPINOSA, ROLA	
Address:	1027 WHISPERING CYPRESS LN	
City-St-Zip:	ORLANDO, FL 32824	
Title:	D	( ) Delete
Name:	VELEZ, RUEBEN	
Address:	50989 HWY 27 #384	
City-St-Zip:	DAVENPORT, FL 33897	

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:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	VELEZ, RUEBEN	
Address:	744 WHISPERING CYPRESS LN	
City-St-Zip:	ORLANDO, FL 32824	

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: SHERMAN MARKOWITZ VPD 04/10/2008

Electronic Signature of Signing Officer or Director — Date