

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757236

Entity Name: WILLOW BEND ASSOCIATION, INC.**Current Principal Place of Business:**3825 MEED DRIVE
LAKE WORTH, FL 33467**Current Mailing Address:**3825 MEED DRIVE
LAKE WORTH, FL 33467**FEI Number:** 59-2163131**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GELFAND, MICHAEL J
GELFAND & ARPE, P.A.
1555 PALM BEACH LAKES BLVD. STE#1220
WEST PALM BEACH, FL 33401-5014 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GROSSMAN, BEVERLY F
Address 3742-A ENGLISH LN
City-State-Zip: LAKE WORTH FL 33467

Title VP
Name POMERANTZ, WILLIAM
Address 3546 ENGLEWOOD DR
 #112
City-State-Zip: LAKE WORTH FL 33467

Title D
Name BOURJAILI, NICOLAS
Address 3648-B LAKEVILLE WAY
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name CHERTOFF, MICHAEL
Address 3529 ENGLEWOOD DR
 #324
City-State-Zip: LAKE WORTH FL 33467

Title T
Name FUCHS, NANCY
Address 7926 WILLOW SPRING DR
 #1316
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name LEVIN, RUTH
Address 3954-D VINE TREE TRAIL
City-State-Zip: LAKE WORTH FL 33467

Title D
Name SKULSKY, PHILLIP
Address 7819 WILLOW SPRING DR.
 #415
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name FEIN, CLAIRE
Address 3848-C LAKEVILLE WAY
City-State-Zip: LAKE WORTH FL 33467

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I hereby 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 all other like empowered.

SIGNATURE: BEVERLY GROSSMAN

PRESIDENT

03/16/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

| | |
|-----------------|----------------------|
| Title | DIRECTOR |
| Name | BECKER, FRAN |
| Address | 3616-B LAKEVILLE WAY |
| City-State-Zip: | LAKE WORTH FL 33467 |