

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001572

**Entity Name:** WILLOWS ON THE LAKE AT LAKE JOHIO HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Mar 01, 2018**  
**Secretary of State**  
**CC8935261154**

**Current Principal Place of Business:**

13350 WEST COLONIAL DR  
SUITE 330  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

PO BOX 783367  
WINTER GARDEN, FL 34778 US

**FEI Number: 59-3706244**

**Certificate of Status Desired: No**

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

SOUTHWEST PROPERTY MANAGEMENT  
13350 WEST COLONIAL DR  
SUITE 330  
WINTER GARDEN, FL 34787 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 DIRECTOR  
Name MACTAVISH, FANNY  
Address PO BOX 783367  
City-State-Zip: WINTER GARDEN FL 34778

Title VPD  
Name MAGNES, DARLENE  
Address PO BOX 783367  
City-State-Zip: WINTER GARDEN FL 34778

Title PRESIDENT  
Name TURCHIANO, MITZI  
Address PO BOX 783367  
City-State-Zip: WINTER GARDEN FL 34778

Title SECRETARY, TREASURER  
Name HASSAN, MOHAMMED  
Address PO BOX 783367  
City-State-Zip: WINTER GARDEN FL 34778

Title DIRECTOR  
Name NUZZI, JAMES  
Address PO BOX 783367  
City-State-Zip: WINTER GARDEN FL 34778

*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: MITZI TURCHIANO**

**PRESIDENT**

**03/01/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date