

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23036

**FILED**  
**Mar 26, 2014**  
**Secretary of State**  
**CC4607698488**

**Entity Name:** WILLA LAKE PHASE ONE HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

1034 WILLA LAKE CR.  
OVIEDO, FL 32765

**Current Mailing Address:**

860 NORTH S.R. 434  
SUITE 1009  
ALTAMONTE SPRINGS, FL 32714 US

**FEI Number: 59-3067730**

**Certificate of Status Desired: No**

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

CAMPBELL, MARILYN  
860 NORTH S.R. 434  
STE. 1009  
ALTAMONTE SPRINGS, FL 32714 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 ST  
Name KISSINGER, ROBERT  
Address 860 NORTH S.R. 434  
SUITE 1009  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title P  
Name JESSEE, RAYMOND  
Address 860 NORTH S.R. 434  
SUITE 1009  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title D  
Name THORBERRY, RUTH J  
Address 860 NORTH S.R. 434  
SUITE 1009  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title VP  
Name MONTELEONE, ANTHONY  
Address 860 NORTH S.R. 434  
SUITE 1009  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title MANAGER  
Name RUSSELL, MIRIAM  
Address 860 NORTH S.R. 434, SUITE 1009  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR  
Name LEGASSICK, JERRY  
Address 860 NORTH S.R. 434  
SUITE 1009  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

*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: MIRIAM RUSSELL**

**MANAGER**

**03/26/2014**

Electronic Signature of Signing Officer/Director Detail

Date