

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28252

**FILED**  
**Jan 15, 2016**  
**Secretary of State**  
**CC2338108226**

**Entity Name:** WILLOW RUN HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1065 MAITLAND CENTER COMMONS BLVD  
MAITLAND, FL 32751

**Current Mailing Address:**

P O BOX 1038  
GOLDENROD, FL 32733

**FEI Number:** 59-3021417

**Certificate of Status Desired:** No

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

KLEMM, RUSSELL EESQ  
C/O CLAYTON & MCCULLOH  
1065 MAITLAND CENTER COMMONS BLVD  
MAITLAND, FL 32751 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 DT  
Name PHELPS, LILLIAN B  
Address 992 WILLOW RUN LANE  
City-State-Zip: WINTER SPRINGS FL 32708

Title DP  
Name PHELPS, WILLIAM E  
Address 992 WILLOW RUN LANE  
City-State-Zip: WINTER SPRINGS FL 32708

Title DVP  
Name DIXON, BETTY  
Address 997 WILLOW RUN LANE  
City-State-Zip: WINTER SPRINGS FL 32708

Title SOCIAL DIR  
Name CIRCOSTA, GLORIA  
Address 931 WILLOW RUN LANE  
City-State-Zip: WINTER SPRINGS FL 32708

Title DS  
Name MASON, NANCY  
Address 943 WILLOW RUN LANE  
City-State-Zip: WINTER SPRINGS FL 32708

Title ARB  
Name STOFF, LAWRENCE  
Address 986 WILLOW RUN LANE  
City-State-Zip: WINTER SPRINGS FL 32708

*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:** WILLIAM PHELPS

**PRESIDENT**

**01/15/2016**

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

\_\_\_\_\_  
Date