FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996 3-1596 B-2309

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS C

DOCUMENT # 214204 (0)

1. Corporation Name

WILLOW BRANCH COOPERATIVE APARTMENTS, INC.

Principal Place of Business	Mailing Address
2936 RIVERSIDE AVE. #2 JACKSONVILLE FL 32205-~~8109~~ 8133	2936 RIVERSIDE AVE. #2 JACKSONVILLE FL 32205-~~8109~~ 8133

2. Principal Place of Business
21
Suite, Apt #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 07/30/1958
3a. Date of Last Report: 03/06/1995
4. FEI Number: 59-6069253 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

RUSHING, G ALLEN
2936 RIVERSIDE AVE.
#2
JACKSONVILLE FL 32205 -8133

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: G. Allen Rushing Secretary-Treasurer 3-11-96
DATE

12. OFFICERS AND DIRECTORS

TITLE	VPD	☒ DELETE
NAME	~~DORMAN, NANCY~~ ~~Pamela Halliman~~	
STREET ADDRESS	2936 RIVERSIDE AVE 1	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	STD	☐ DELETE
NAME	ALLEN, RUSHING	
STREET ADDRESS	2936 RIVERSIDE AVE #2	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	PD	☐ DELETE
NAME	FANT, JULIAN E	
STREET ADDRESS	2936 RIVERSIDE AVE #3	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	P	☐ DELETE
NAME	TURNER, MARY A.	
STREET ADDRESS	2936 RIVERSIDE AVE #4	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	D	☒ DELETE
NAME	~~DORMAN, FRANK~~	
STREET ADDRESS	~~2936 RIVERSIDE AVE #1~~	
CITY-ST-ZIP	~~JACKSONVILLE FL~~	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VPD	☐ Change ☐ Addition
1.2 NAME	Pamela Halliman	
1.3 STREET ADDRESS	2936 Riverside Ave #1	
1.4 CITY-ST-ZIP	Jacksonville, FL 32205	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: G. Allen Rushing 3-11-96 904-388-5052
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
G. Allen Rushing