

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727311

FILED
Apr 03, 2009
Secretary of State

Entity Name: WILLOWBROOK GARDENS - A CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

449 SWALLOW DRIVE
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

Current Mailing Address:

449 SWALLOW DRIVE
MIAMI SPRINGS, FL 33166

New Mailing Address:

FEI Number: 59-1565448

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERICAN MGMT REALTY INC.
2011 WEST 62ND STREET
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TARONIS, NANCY
Address: 449 SWALLOW DRIVE, #18
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: T () Delete
Name: PRIESS, IRENE
Address: 449 SWALLOW DRIVE, 03
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VP () Delete
Name: LEO, LUCIA DE
Address: 641 SWAN AVE.
City-St-Zip: MIAMI, FL 33166

Title: S () Delete
Name: PALMER, MARJORIE
Address: 449 SWALLOW DRIVE #6
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: D () Delete
Name: NELSON, MAGANA
Address: 95 SOUTH DRIVE #4
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NANCY TATARONIS

P

04/03/2009

Electronic Signature of Signing Officer or Director

Date