## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#729839** 

FILED Apr 22, 2009 Secretary of State

Entity Name: WILLOWBROOK ASSOCIATION, INC

Enuty Nan	ne: WILLOWE	BROOK ASSOCIATION, INC.				
Current Principal Place of Business:			New Princi	New Principal Place of Business:		
28100 US I	HWY 19 N			3001 EXECUTIVE DRIVE		
305 CLEARWATER, FL 33761 US			SUITE 260 CLEARWAI	SUITE 260 CLEARWATER, FL 33762 US		
Current M	ailing Addres	s:	New Mailin	New Mailing Address:		
28100 US HWY 19 N				200 NORTH PINE AVENUE		
305 CLEARWA	ATER, FL 3376	81 US	SUITE A OLDSMAR,	SUITE A OLDSMAR, FL 34677 US		
FEI Number:	59-1870329	FEI Number Applied For ( )	FEI Number Not Applic	cable ( ) C	ertificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and /	Address of Nev	w Registered Agent:	
RESOURCE PROPERTY MGMT 28100 US HWY 19 N #305 CLEARWATER, FL 33761 US The above named entity submits this statement for the purpose o			200 NORTH SUITE A OLDSMAR,	OLDSMAR, FL 34677 US		
	of Florida.	admits the statement for the p	dipose of offdriging fa	regiotered offic	se of registered agent, or both,	
SIGNATUF	RE: MICHAEL	BRUDNY, PA			04/22/2009	
	Electron	ic Signature of Registered Age	ent		Date	
OFFICERS	S AND DIREC	TORS:	ADDITIONS	S/CHANGES TO	O OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	DVP (X) STEELE, MARIL 1100 EAST BAY LARGO, FL 33	/ DRIVE #J-107	Title: Name: Address: City-St-Zip:	( ) Ch	nange()Addition	
Title: Name: Address: City-St-Zip:	DP () JOHNS, RAY 1100 EAST BAY LARGO, FL 33		Title: Name: Address: City-St-Zip:	( ) Ch	nange()Addition	
Title: Name: Address: City-St-Zip:	DST () JONES, BONNII 1100 EAST BAY LARGO, FL 33	′ DR. #F-59	Title: Name: Address: City-St-Zip:	( ) Ch	nange()Addition	
Title: Name: Address: City-St-Zip:	D () WORTH, WESL 1100 EAST BAY LARGO, FL 33	′ DR. #A-12	Title: Name: Address: City-St-Zip:	( ) Ch	nange()Addition	
Title: Name: Address: City-St-Zip:	D () LAKE, ROGER 1100 EAST BAY LARGO, FL 33		Title: Name: Address: City-St-Zip:	( ) Cr	nange()Addition	

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: RAY JOHNS P 04/22/2009