

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752443

FILED  
Apr 28, 2012  
Secretary of State

**Entity Name:** WILLOW WOOD MID-RISE CONDOMINIUM II ASSOCIATION, INC.

**Current Principal Place of Business:**

6801 WILLOWWOOD DR  
100  
BOCA RATON, FL 334343531

**New Principal Place of Business:**

**Current Mailing Address:**

6801 WILLOWWOOD DR  
100  
BOCA RATON, FL 334343531

**New Mailing Address:**

**FEI Number:** 59-2001061      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

ISAACSON, WILLIAM K  
C/O LANG MANAGEMENT COMPANY, INC.  
21045 COMMERCIAL TRAIL  
BOCA RATON, FL 334861006 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: T  
Name: LEPOLSTAT, MAXINE  
Address: 6815 WILLOWWOOD DR  
City-St-Zip: BOCA RATON, FL 33434

Title: P  
Name: WHITEMAN, LEONORE  
Address: 6815 WILLOWWOOD DR  
City-St-Zip: BOCA RATON, FL 33434

Title: S  
Name: SERES, PHILLIP  
Address: 6845 WILLOW WOOD DR, # 3011  
City-St-Zip: BOCA RATON, FL 33434

Title: D  
Name: ELLIOT, SALTZ  
Address: 6845 WILLOW WOOD DR  
City-St-Zip: BOCA RATON, FL 33434

Title: VPD  
Name: CORREA, LOUIS  
Address: 6845 WILLOW WOOD DR #3012  
City-St-Zip: BOCA RATON, FL 33434

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: LEONORE WHITEMAN

PRES

04/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date