

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2007 08:00 AM
Secretary of State

DOCUMENT # L99000000424

1. Entity Name
WILLOWS APARTMENTS, L.L.C.



Principal Place of Business
201 SOUTH AMELIA AVENUE, SUITE G-4
DELAND, FL 32724

Mailing Address
201 SOUTH AMELIA AVENUE, SUITE G-4
DELAND, FL 32724



02272007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3553663

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GUIRLINGER, ROBERT A
201 SOUTH AMELIA AVENUE, SUITE G-4
DELAND, FL 32724

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

Filing Fee is \$50.00
Due by May 1, 2007

U000000720575
05/01/07-80109-014 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CENTRAL MANAGEMENT COMPANY OF OHIO, INC.
STREET ADDRESS	201 SOUTH AMELIA AVENUE, SUITE G-4
CITY-ST-ZIP	DELAND, FL 32724

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Donald Hay
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-16-07

Date

6148632227

Daytime Phone #