


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N00000001521	
1. Entity Name WILLOW WALK PROPERTY OWNERS' ASSOCIATION, INC.	

Principal Place of Business 11635 NORTHWEST 1ST AVENUE GAINESVILLE, FL 32607	Mailing Address 11635 NORTHWEST 1ST AVENUE GAINESVILLE, FL 32607
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FILED

2006 APR 19 AM 10:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03012006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-3631143	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CURTIS, JOHN M SR.
11635 NORTHWEST 1ST AVENUE
GAINESVILLE, FL 32607

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

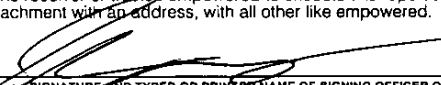
9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CURTIS, JOHN M SR. 11635 NORTHWEST 1ST AVENUE GAINESVILLE, FL 32607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CURTIS, GAIL W 11635 NORTHWEST 1ST AVENUE GAINESVILLE, FL 32607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STOKES, ANNE 315 N.W. 138 TERRACE, #100 JONESVILLE, FL 32669
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/27/06--01017--006 **70.00

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12. 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 or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **John M. Curtis**
President
04/17/06 352-332-0838

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #