


2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N00000004058 1. Entity Name WILLOUGHBY TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.						FILED 05 OCT 11 PM 1:17 STORED IN STATE DEPARTMENT OF REVENUE	
Principal Place of Business 6421 CONGRESS AVE SUITE 110 BOCA RATON, FL 33487				Mailing Address 6421 CONGRESS AVE SUITE 110 BOCA RATON, FL 33487			
2. Principal Place of Business <i>Associated Property Mgmt</i> Suite, Apt. #, etc. 1928 LAKE WORTH RD. City & State LAKE WORTH, FL Zip 33461		3. Mailing Address <i>Associated Property Mgmt.</i> Suite, Apt. #, etc. 1928 LAKE WORTH RD. City & State LAKE WORTH, FL Zip 33461		09262005 REIN-NP CR2E099 (6/04)		4. FEI Number 65-1045909	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent CASTLE MANAGEMENT, INC 6421 CONGRESS AVE SUITE 110 BOCA RATON, FL 33487					
7. Name and Address of New Registered Agent Name <i>Associated Property Management</i> Street Address (P.O. Box Number is Not Acceptable) 1928 LAKE WORTH RD. City LAKE WORTH		State FL		Zip Code 33461		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 <i>[Signature]</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		Agent <i>[Signature]</i> <small>(NOTE: Registered Agent signature required when reinstating)</small>		000060453002 10/11/05--01001-0001-#236.25 DATE		FILE NOW!!! FEE IS \$236.25 After January 1, 2006, Fee will be \$297.50	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE PD NAME RODRIGUEZ, MARILYN STREET ADDRESS 4927 PINEMORE LANE CITY-ST-ZIP LAKE WORTH, FL 33463	<input checked="" type="checkbox"/> Delete						
TITLE TD NAME BROWN, BOB STREET ADDRESS 4668 PINEMORE LANE CITY-ST-ZIP LAKE WORTH, FL 33463	<input checked="" type="checkbox"/> Delete						
TITLE VSD NAME HAY, STEPHANIE STREET ADDRESS 4779 PINEMORE LANE CITY-ST-ZIP LAKE WORTH, FL 33463	<input checked="" type="checkbox"/> Delete						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete						
TITLE PD NAME BROWN, ROBERT STREET ADDRESS 4668 PINEMORE LANE CITY-ST-ZIP LAKE WORTH, FL 33463	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition						
TITLE VD NAME RODRIGUEZ, MARILYN STREET ADDRESS 4927 PINEMORE LANE CITY-ST-ZIP LAKE WORTH, FL 33463	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition						
TITLE SD NAME MEYERS, BARBARA STREET ADDRESS 4703 PINEMORE LANE CITY-ST-ZIP LAKE WORTH, FL 33463	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition						
TITLE TD NAME DRESCIA, LUCIENNE STREET ADDRESS 4615 PINEMORE LANE CITY-ST-ZIP LAKE WORTH, FL 33463	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition						
TITLE PD NAME POSILLICO, ROBERT J. STREET ADDRESS 4667 PINEMORE LANE CITY-ST-ZIP LAKE WORTH, FL 33463	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition						
TITLE D NAME Jagueline Wagoner STREET ADDRESS 4867 Pinemore Lane CITY-ST-ZIP LAKE WORTH, FL 33463	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition						
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>[Signature]</i> MARILYN RODRIGUEZ VP 9/30/05 561-649-07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>							