## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000007954

FILED Jan 19, 2010 Secretary of State

Entity Name: WILLOW POND/VOLUSIA COUNTY CHAPTER #5319 OF AARP, INC.

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

875 WILMETTE AVE, CLUBHOUSE APT. #705

875 WILMETTE AVE WILLOW POND CLUBHOUSE

ORMOND BEACH, FL 32174

ORMOND BEACH, FL 321749518

**New Mailing Address:** 

47 COQUINA RIDGE WAY ATTN: DON WASSON ORMOND BEACH, FL 32174

**Current Mailing Address:** 

47 COQUINA RIDGE WAY ORMOND BEACH, FL

FEI Number: 52-2262213

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SPIEGEL & UTRERERA, P.A 1840 CORAL WAY, 4TH FLOOR DAYTONA BEACH, FL 32114

1840 CORAL WAY

WINTER SPRINGS, FL 32719

SPIEGEL & UTRERERA, P.A.

US

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:

01/19/2010

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

**PRES** 

HEROLD, GERRY Name:

Address: 1300 SUNNINGDALE LANE City-St-Zip: ORMOND BEACH, FL 32174

Title: **VPRE** 

Name: HEROLD, PATRICIA Address: 1300 SUNNINGDALE LANE City-St-Zip: ORMOND BEACH, FL 32174

Title: SECT

POTEET, SHIRLEY Name:

1325 FLEMMONG AVE LOT 231 Address: City-St-Zip: ORMOND BEACH, FL 32174

Title: **TREA** 

Name: WASSON, DONALD M Address: 47 COQUINA RIDGE WAY City-St-Zip: ORMOND BEACH, FL 32174

Title: DIRE Name: JAIN, MARY

825 WILMETTE #706 Address: ORMOND BEACH, FL 32174 City-St-Zip:

Title:

LESCH. PATRICIA Name: Address: 308 GATEWOOD COURT ORMOND BEACH, FL 32174 City-St-Zip:

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: DONALD M. WASSON **TREA** 01/19/2010