2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007827

FILED Apr 20, 2012 Secretary of State

Entity Name: WILLOWBEND COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

LIGHTHOUSE MANAGEMENT 16 CHURCH STREET OSPREY, FL 34229

16 CHURCH STREET

OSPREY, FL 34229

New Mailing Address:

Current Mailing Address:

LIGHTHOUSE MANAGEMENT

LIGHTHOUSE PROPERTY MANAGEMENT

LIGHTHOUSE PROPERTY MANAGEMENT

16 CHURCH STREET OSPREY, FL 34229

16 CHURCH STREET OSPREY, FL 34229

FEI Number: 04-3604668

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:

CRIST, LUCILLE 597 CRANE PRAIRIE WAY OSPREY, FL 34229

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:

HALFAST, CHUCK Name: Address: 518 LATITUDE LANE City-St-Zip: OSPREY, FL 34229

Title:

Name: LEONARD, DUTCH Address: 647 CRANE PRAIRIE WAY City-St-Zip: OSPREY, FL 34229

Title:

CRIST, LUCILLE DR. Name: Address: 597 CRANE PRAIRIE WAY City-St-Zip: OSPREY, FL 34229

Title:

Name: MCAWARD, NANCY 597 CRANE PRAIRIE WAY Address: City-St-Zip: OSPREY, FL 34229

Title:

KOMPARE, JOHN Name: 531 HABITAT BLVD. Address: City-St-Zip: SARASOTA, FL 34229

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: KYANNE MERRILL CAM 04/20/2012