

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003876

FILED
Mar 09, 2009
Secretary of State

Entity Name: WILLOW LAKE TRAIL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12825 S.E. SUZANNE DRIVE
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

12825 S.E. SUZANNE DRIVE
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: 54-2110605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNAMARA, JAMES R
12825 S.E. SUZANNE DRIVE
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: MCNAMARA, LAWRENCE W
Address: 12825 S.E. SUZANNE DRIVE
City-St-Zip: HOBE SOUND, FL 33455

Title: PD () Delete
Name: SANGEORGE, DAVID S JR.
Address: 12825 S.E. SUZANNE DRIVE
City-St-Zip: HOBE SOUND, FL 33455

Title: VPD () Delete
Name: MCNAMARA, JAMES R
Address: 12825 S.E. SUZANNE DRIVE
City-St-Zip: HOBE SOUND, FL 33455

Title: STD () Delete
Name: ROSS, KATHERINE
Address: 12825 S.E. SUZANNE DRIVE
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JAMES R. MCNAMARA

D

03/09/2009

Electronic Signature of Signing Officer or Director

Date