2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006267

FILED May 16, 2005 Secretary of State

Entity Name: WILLOW GROVE ESTATES HOMEOWNERS ASSOCIATION, INC.

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

14462 OLIVER ST 8045 WILLOW COURT LARGO, FL 33774 SEMINOLE, FL 33776

Current Mailing Address: New Mailing Address:

14462 OLIVER ST8045 WILLOW COURTLARGO, FL 33774SEMINOLE, FL 33776

FEI Number: 20-0596621 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LIERMAN, THOMAS G

14462 OLIVER ST

LARGO, FL 33774 US

SFERRAZZA, DAVID Z

8045 WILLOW COURT

SEMINOLE, FL 33776 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: DAVID Z. SFERRAZZA 05/16/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: LIERMAN, THOMAS G Name: SFERRAZZA, DAVID Z

 Address:
 14462 OLIVER ST
 Address:
 8045 WILLOW COURT

 City-St-Zip:
 LARGO, FL 33774
 City-St-Zip:
 SEMINOLE, FL 33776 US

Title: VD () Delete Title: VP (X) Change () Addition Name: NARZINSKY, LARA E Name: ONISHI, SHINZO

Address: 13416 74 AVE N Address: 1484 SEA GULL DRIVE #208

City-St-Zip: SEMINOLE, FL 33776 City-St-Zip: PALM HARBOR, FL 34685

Title: STD () Delete Title: T (X) Change () Addition Name: NARZINSKY, ERWIN G Name: ANDREWS, LUKE

 Address:
 13416 74 AVE N
 Address:
 8115 131ST STREET

 City-St-Zip:
 SEMINOLE, FL 33776
 City-St-Zip:
 SEMINOLE, FL 33776

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 ANDREWS, DANA

 Address:
 Address:
 8115 131ST STREET

 City-St-Zip:
 City-St-Zip:
 SEMINOLE, FL 33776

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID Z. SFERRAZZA P 05/16/2005