2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000002552

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Entity Name: WILLOW CHASE COMMUNITY ASSOCIATION, INC.

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

6009 BUSINESS BLVD 2477 STICKNEY POINT RD SUITE 118A

SARASOTA, FL 34240 SARASOTA, FL 34231

Current Mailing Address: New Mailing Address:

6009 BUSINESS BLVD 2477 STICKNEY POINT RD SUITE 118A

SARASOTA, FL 34240 SARASOTA, FL 34231

FEI Number: 20-0920917 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:

THOMPSON, JOCE ARGUS MANAGEMENT, INC 6009 BUSINESS BLVD ARGUS MANAGEMENT, INC 2477 STICKNEY POINT ROAD SUITE 118A

SARASOTA, FL 34240 US SARASOTA, FL 34231 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: WALT HAMMERLING 06/26/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: P () Delete Title: P (X) Change () Addition

 Name:
 HAGER, BILL
 Name:
 DANIELS, ROBERT

 Address:
 6009 BUSINESS BLVD
 Address:
 1102 CIELO COURT

 City-St-Zip:
 SARASOTA, FL 34240
 City-St-Zip:
 NORTH VENICE, FL 34275

Title: VP () Delete Title: S/T (X) Change () Addition

 Name:
 DAVIE, CECELIA
 Name:
 HAGE, DIANE

 Address:
 6009 BUSINESS BLVD
 Address:
 1174 CEILO COURT

 City-St-Zip:
 SARASOTA, FL 34240
 City-St-Zip:
 NORTH VENICE, FL 34275

 $\label{eq:title:Title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 THOMPSON, JOCE
 Name:
 GOBIN, RONALD

 Address:
 6009 BUSINESS BLVD
 Address:
 1214 CIELO COURT

 City-St-Zip:
 SARASOTA, FL 34240
 City-St-Zip:
 NORTH VENICE, FL 34275

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

 Name:
 Name:
 PAPPAS, BERNARD

 Address:
 Address:
 1078 ANCORA BLVD

 City-St-Zip:
 City-St-Zip:
 NORTH VENICE, FL 34275

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: ROBERT DANIELS P 06/26/2009