## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N14422

FILED Apr 27, 2008 Secretary of State

Entity Name: WILLOW SPRINGS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
1162 INDIA VENICE, FL	N HILLS BLVE . 34293 US	_			
Current Mailing Address:			New Maili	New Mailing Address:	
1162 INDIA VENICE, FL	N HILLS BLVI . 34293 US	_			
FEI Number:	59-2802340	FEI Number Applied For ( )	FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
1162 INDIA	OWELL, INC N HILLS BLVE . 34293 US				
The above in the State		submits this statement for the pu	rpose of changing it	ts registered office or registered agent, or both,	
SIGNATUR	E:				
	Electron	ic Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () TAYLOR, DAVE 3156 WILLOW VENICE, FL 34	SPRINGS CIR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ASD () HARRIS, JANE 3164 WILLOW VENICE, FL 34		Title: Name: Address: City-St-Zip:	SD (X) Change ( ) Addition HARRIS, JANE 3164 WILLOW SPRINGS CIR VENICE, FL 34293	
Title: Name: Address: City-St-Zip:	SD () YERICH, JACK 3178 WILLOW VENICE, FL 34		Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition YERICH, JACK 3178 WILLOW SPRINGS CIR VENICE, FL 34293	
Title: Name: Address: City-St-Zip:	TD () GERBER, DENN 3165 WILLOW VENICE, FL 34	SPRINGS CIR	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition GERBER, DENNIS 3165 WILLOW SPRINGS CIR VENICE, FL 34293	
Title: Name: Address: City-St-Zip:	ATD () WILLITS, JIM 3124 MEADOW VENICE, FL 34		Title: Name: Address: City-St-Zip:	TD (X) Change ( ) Addition ROHLAND, BOB 3016 COMMUNITY CENTER DRIVE VENICE, FL 34293	
Title: Name: Address: City-St-Zip:	VD () BEACH, JIM 3162 WILLOW VENICE, FL 34		Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: DAVE TAYLOR PRES 04/27/2008