2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N19115

1. Entity Name

Willow Greens Home Owners Assoc.

FILED
SECRETARY OF STATE
01 MAY 15 AM 9:15

Principal Place of Business	Mailing Address
c/o Lang Management	c/o Lang Management.

DO NOT WRITE IN THIS SPACE

AMENDED

2. Principal Place of Business	3. Mailing Address
21045 Commercial Trail	21045 Commercial Trail
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Boca Raton, FL	Boca Raton, FL
Zip 33486 Country USA	Zip 33486 Country USA

4. FEI Number 65-0054270 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ISAACSON, WILLIAM K. LANG MANAGEMENT CO., INC.	Name: ISAACSON, WILLIAM K. Street Address (P.O. Box Number is Not Acceptable): LANG MANAGEMENT COMPANY, INC. 21045 COMMERCIAL TRAIL City: BOCA RATON FL Zip Code: 33486

8. 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 _____ 05-01-01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: ~~FEE IS $61.25~~	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to: Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD NAME STREET ADDRESS CITY-ST-ZIP	JAMES SOUSANE 2202 NW 60ST BOCA RATON, FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 900004416809--5 ~~06/13/01--01011--005~~ *****61.25 *****61.25
TITLE VPD NAME STREET ADDRESS CITY-ST-ZIP	DOUGLAS CAMPBELL 6047 NW 23 AVE BOCA RATON, FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE SD NAME STREET ADDRESS CITY-ST-ZIP	JAY PISIK 6001 NW 23 AVE BOCA RATON, FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE ~~TD~~ NAME STREET ADDRESS CITY-ST-ZIP	HARVEY GELMAN 2226 NW 60 ST BOCA RATON, FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	JACK RUBENSTEIN 6056 NW 22 AVE BOCA RATON, FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition AD

CR2E037 (11/00)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/25/01 9958911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #