2007 NOT-FOR-PROFIT CORPORATION

FILED Apr 23, 2007 8:00 am Secretary of State

04-23-2007 90098 022 ****70.00

ANNUAL	REPORT	

changed, or on an attachment with an address

SIGNATURE AND TYPES

SIGNATURE: .

DOCUMENT # N19115 WILLOW GREENS HOMEOWNERS ASSOCIATION, INC. 40076605 Principal Place of Business Mailing Address 21045 COMMERCIAI TRAIL 21045 COMMERCIAL TRAIL BOCA RATON, FL 33486 BOCA RATON, FL 33486 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 04112007 CR2E037 (12/06) City & State City & State 4. FEI Number Applied For 65-0054270 Not Applicable Zio \$8.75 Additional Country Żip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ISAACSON, WILLIAM K LANG MANAGEMENT COMPANY Street Address (P.O. Box Number is Not Acceptable) 21045 COMMERCIAL TRAIL BOCA RATON, FL 33486 Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution Florida Department of State Due by May 1, 2007 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE Delete TITLE D ☐ Addition SOUSANE, JAMES NAME NAME STREET ADDRESS 2202 NW 60 STREET STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33496 CITY-ST-ZIP VPD , ■ Addition ☐ Defete Change TITLE TITLE CAMPBELL, DOUGLAS NAME 6047 NW 23 AVE STREET ADDRESS STREET ADDRESS BOCA RATON, FL 33496 CITY-ST-ZIP CITY-ST-ZIP ₽D TITLE SD ☐ Delete TITLE Change ☐ Addition PISIK, JAY NAME NAME 6001 NW 23 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33496 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE GELMAN, HARVEY NAME NAME 2226 NW 60 STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33496 CITY-ST-ZIP Addition TITLE ☐ Change TITLE 📈 Delete ROSENTHAL, LORI NAME Innes Wick NAME STREET ADDRESS 6045 NW 22ND AVE STREET ADDRESS BOCA RATON, FL 33496 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information at my signature shall have the same legal effect as if made under oath; that I am an officer or director ort as ipquired by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with this filling does not qualificated on this report or supplemental report is the and accurate and the corporation or the receiver or trustee employered to execute this

FICER OR DIRECTOR