## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # N19170**

1. Entity Name

WILLOW LAKES OWNERS ASSOCIATION, INC.



FILED Apr 09, 2007 08:00 All Secretary of State

Principal Place of Business 1040 WILLOW LAKE COURT Mailing Address

1040 WILLOW LAKE COURT PENSACOLA, FL 32506 US %WILLOW LAKE OWNERS ASSOC. P O BOX 3602 PENSACOLA, FL 32516 US



DO NOT WRITE IN THIS SPACE

03222007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-2908340

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARDONA, ALEXANDRA 1040 WILLOW LAKE COURT PENSACOLA, FL 32506

changed, or on an attachment

## DO NOT WRITE IN THIS SPACE

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.	Signature, typed or printed name of registered agent and title	e if applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Finan     Trust Fund Contribution.	cing:	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GARNHAM, IAN 10671 WILLOW LAKWE DR PENSACOLA, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PHILLIPS, JEAN 1030 WILLOW LAKE CT PENSACOLA, FL 32506				U00000697238 04/18/07-80032-021 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D . GOLDEN, LYNWOOD D. 10841 WILLOW LAKE DRIVE PENSACOLA, FL			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RHODES, CECIL 10661 WILLOW LAKE DRIVE PENSACOLA, FL			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WALL, LINDA 1010 WILLOW LAKE COURT PENSACOLA, FL 32506				•
TITLE HAME STREET ADDRESS CITY-ST-ZIP	PD CARDONA, ALEXANDRA 1040 WILLOW LAKE COURT PENSACOLA, FL 32506			٠.	· · · · · · · · · · · · · · · · · · ·
12. I hereby certify that the information supplied with this filipe does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation of the receiver of rustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if					