

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90035 048 ****61.25

DOCUMENT # N19170 1. Entity Name WILLOW LAKES OWNERS ASSOCIATION, INC.					
Principal Place of Business 1040 WILLOW LAKE COURT PENSACOLA, FL 32506 US			Mailing Address %WILLOW LAKE OWNERS ASSOC. P O BOX 3602 PENSACOLA, FL 32516 US		
2. Principal Place of Business - No P.O. Box # 1031 WILLOW LAKE CT Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State PENSACOLA FL		City & State		4. FEI Number 59-2908340	
Zip 32506		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARDONA, ALEXANDRA 1040 WILLOW LAKE COURT PENSACOLA, FL 32506				7. Name and Address of New Registered Agent Name JOHN CARTER Street Address (P.O. Box Number is Not Acceptable) 1031 WILLOW LAKE CT City PENSACOLA FL Zip Code 32506	
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 40%; text-align: center;"> JOHN CARTER <small>(NOTE: Registered Agent signature required when resigning)</small> </div> <div style="width: 20%; text-align: center;"> 4-5-08 <small>DATE</small> </div> </div>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GARNHAM, IAN 10671 WILLOW LAKWE DR PENSACOLA, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PHILLIPS, JEAN 1030 WILLOW LAKE CT PENSACOLA, FL 32506	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLDEN, LYNWOOD D. 10641 WILLOW LAKE DRIVE PENSACOLA, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RHODES, CECIL 10661 WILLOW LAKE DRIVE PENSACOLA, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WALL, LINDA 1010 WILLOW LAKE COURT PENSACOLA, FL 32506	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARDONA, ALEXANDRA 1040 WILLOW LAKE COURT PENSACOLA, FL 32506	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARTER, JOHN 1031 WILLOW LAKE CT PENSACOLA FL 32506	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: IAN GARNHAM (TREAS) 4/5/08 850-456-3533 <small>SIGNATURE AND ADDRESS OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					