

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90048 042 \*\*\*\*61.25

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NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N21798**

1. Corporation Name  
**WILLOW BROOK IN PELICAN BAY CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business 4148-A CORPORATE SQUARE NAPLES FL 34104 US	Mailing Address 4148-A CORPORATE SQUARE NAPLES FL 34104 US
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 07/30/1987
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2872862
City & State 23	City & State 28	Applied For Not Applicable
Zip 24	Country 25	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees

9. Name and Address of Current Registered Agent  NEWELL, WILLIAM 4148-A CORPORATE SQUARE NAPLES FL 34104	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	WALTERS, BILL 780 WILLOW BROOK DRIVE #705 NAPLES FL 34108	1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE VD	KUKEAS, DEMOS 768 WILLOW BROOK DRIVE #1008 NAPLES FL 34108	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE <del>TD</del>	<del>BROWN, CHARLES</del> <del>700 WILLOW BROOK DRIVE #302</del> <del>NAPLES FL 34108</del>	3.1 TITLE	TD Smith, Willis 790 Willow Brook Drive #407 NAPLES FL 34108
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE <del>SD</del>	<del>KESSEL, GEORGE</del> <del>761 WILLOW BROOK DRIVE #1406</del> <del>NAPLES FL 34105</del>	4.1 TITLE	TD Mueller, Fred 765 Willow Brook Dr #1501 NAPLES FL 34108
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE D	SANDRITTER, FRED 764 WILLOW BROOK DRIVE #1103 NAPLES FL 34108	5.1 TITLE	TD Mahoney, Bill 765 Willow Brook Dr #1502 NAPLES FL 34108
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	TD Everett Rosemary 761 Willow Brook Dr #1401 NAPLES FL 34108
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowers.

SIGNATURE: \_\_\_\_\_ DATE: 3/5/99 PHONE: 441-370-4310

CR2E037 (1/198)