

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21798

FILED
Feb 01, 2011
Secretary of State

Entity Name: WILLOW BROOK IN PELICAN BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% NEWELL PROPERTY MANAGEMENT
5435 JAEGER RD. #4
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

% NEWELL PROPERTY MANAGEMENT
5435 JAEGER RD. #4
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 59-2872862 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NEWELL, WILLIAM
5435 JAEGER ROAD #4
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD
Name: GUILD, DAVID
Address: 790 WILLOW BROOK DRIVE #305
City-St-Zip: NAPLES, FL 34108

Title: VD
Name: GERBOSI, PETER
Address: 788 WILLOW BROOK DRIVE #1004
City-St-Zip: NAPLES, FL 34108

Title: SD
Name: MCGRATH, TOM
Address: 788 WILLOW BROOK DRIVE #507
City-St-Zip: NAPLES, FL 34108

Title: TD
Name: SMITH, WILLIS
Address: 792 WILLOW BROOK DRIVE #407
City-St-Zip: NAPLES, FL 34108

Title: D
Name: RUSHTON, RICHARD
Address: 765 WILLOW BROOK DRIVE #1504
City-St-Zip: NAPLES, FL 34108

Title: D
Name: KRETZ, RAY
Address: 790 WILLOW BROOK DRIVE #306
City-St-Zip: NAPLES, FL 34108

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAVID GUILD

PD

02/01/2011

Electronic Signature of Signing Officer or Director

Date