2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 09, 2006
Secretary of State

DOCUMENT# N27049

Entity Name: WILLOW WOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1211-G W HORATIO ST.
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

1211-G W HORATIO ST.
TAMPA, FL 33606

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COOL, THOMAS P
5017 MUIR WAY
LITHIA, FL 33547 US

Name and Address of New Registered Agent:

COOL, THOMAS P
5017 MUIR WAY
LITHIA, FL 33547 US

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: THOMAS P. COOL 10/09/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BETSY WISHER,
Address: 1211-B HORATIO ST
City-St-Zip: TAMPA, FL

Title: TD ( ) Delete
Name: COOL, TOM
Address: 2566 REGAL RIVER RD
City-St-Zip: VALRICO, FL 33594

Title: SD ( ) Delete
Name: GREEN, JAY
Address: 1211 F W. HORATIO ST
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SWISHER, BETSY L
Address: 1211 B W. HORATIO ST.
City-St-Zip: TAMPA, FL 33606

Title: TD (X) Change ( ) Addition
Name: COOL, TOM
Address: 5017 MUIR WAY
City-St-Zip: LITHIA, FL 33547

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BETSY L. SWISHER PD 10/09/2006
Electronic Signature of Signing Officer or Director Date