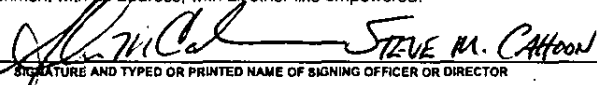


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 AM
Secretary of State

DOCUMENT # N28058		
1. Entity Name GEORGETOWN AT WILLOWBEND HOMEOWNERS ASSOCIATION, INC.		
Principal Place of Business C/O STEVE M CAHOON 2524 GEORGETOWN LANE FT. WALTON BEACH, FL 32547 US		Mailing Address C/O STEVE M CAHOON 2524 GEORGETOWN LN FT WALTON BCH, FL 32547 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent CAHOON, STEVE M 2524 GEORGETOWN LN FT. WALTON BEACH, FL 32547		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  DATE <u>4/16/08</u> Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		000000913750 05/08/08-80029-004 70.00
TITLE	PD	DO NOT WRITE IN THIS SPACE
NAME	CAHOON, STEVE M	
STREET ADDRESS	2524 GEORGETOWN LANE	
CITY-ST-ZIP	FT. WALTON BEACH, FL 32547	
TITLE	STD	
NAME	DYER, RUSSELL	
STREET ADDRESS	2518 GEORGETOWN LANE	DO NOT WRITE IN THIS SPACE
CITY-ST-ZIP	FT. WALTON BEACH, FL	
TITLE	VD	
NAME	CAHOON, DEBRA	
STREET ADDRESS	2524 GEORGETOWN LANE	
CITY-ST-ZIP	FT WALTON BEACH, FL 32547	
TITLE		DO NOT WRITE IN THIS SPACE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		DO NOT WRITE IN THIS SPACE
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:  <u>STEVE M. CAHOON</u>		Date <u>4/16/08</u> Daytime Phone # <u>850-585-9076</u>