2002 UNIFORM BUSINESS REPORT (UBR) FILED May 02, 2002 8:00 am Secretary of State **DOCUMENT # N28126** 1. Entity Name WILLOUGHBY COMMUNITY ASSOCIATION, INC. 05-02-2002 90138 036 ****61.25 Principal Place of Business Mailing Address 3001 SE DOUBLETON DR 3001 SE DOUBLETON DR STUART FL 34997 STUART FL 34997 ИS US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0097237 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name -Street Address (P.O. Box Number is Not Acceptable) REILLY, MICHELE E 3001 SE DOUBLETON DR STUART FL 34997 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to **FILE NOW: FEE IS \$61.25** \$5.00 May Be П Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. DP TITLE ☐ Delete TITLE Change ☐ Addition NAME SUTCH, RICHARD NAME STREET ADDRESS 3001 SE DOUBLETON DR STREET ADDRESS CITY-ST-ZIP stuart fl 34997 CITY-ST-ZIP TITLE SD ☐ Delete Change ☐ Addition NAME FORD, LEIGHTON NAME STREET ADDRESS 3001 SE DOUBLETON DR STREET ADDRESS CITY-ST-ZIP STUART FL 34997 CITY-ST-ZIP TD TITLE Delete -TITLE 귍 Change ☐ Addition HESSENIUS, JOHN NAME NAME GETTIER, GLENN STREET ADDRESS 3001 SE DOUBLETON DR STREET ADDRESS 3001 SE DOUBLETON DR. CITY-ST-ZIP Stuart FL 34997 CITY-ST-ZIP STUART, FL 34997 TITLE ☐ Delete TITLE ☐ Change ☐ Addition LECAS, VALLAS NAME NAME STREET ADDRESS 3001 SE DOUBLETON DR STREET ADDRESS CITY-ST-ZIP STUART FL 34997 CITY-ST-ZIP ☐ Defete TITLE ☐ Change Addition PHILLIPS, EDWARD NAME NAME STREET ADDRESS 3001 SE DOUBLETON DR STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 trusted 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STUART FL 34997

RE(Vallas Lecas

Delete

4/17/02

(772) 220-6000

Change

☐ Addition