2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28252

FILED Apr 01, 2009 Secretary of State

Entity Name: WILLOW RUN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1065 MAITLAND CENTER COMMONS BLVD MAITLAND, FL 32751 US

Current Mailing Address: New Mailing Address:

P O BOX 1038 GOLDENROD, FL 32733

FEI Number: 59-3021417 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KLEMM, RUSSELL E ESQ C/O CLAYTON & MCCULLOH 1065 MAITLAND CENTER COMMONS BLVD MAITLAND, FL 32751 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:

Electronic Signature of Registered Agent

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT () Delete Title: DT (X) Change () Addition
Name: CAIN, TAMMY Name: PHELPS, LILLIAN B
Address: 4212 VANITA CT. Address: 992 WILLOW RUN LANE

City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: WINTER SPRINGS, FL 32708

Title: PD Title: (X) Change () Addition () Delete Name: DIXON, BETTY Name: IREGUI, ANA MARIA Address: 997 WILLOW RUN LANE Address: 997 WILLOW RUN LANE City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: WINTER SPRINGS, FL 32708

Title:VP () DeleteTitle:DVP (X) Change () AdditionName:PHELPS, BILLName:SMITH, DONALDAddress:992 WITHERS RIN RDAddress:772 COLD STREAM COURT

Address: 992 WITHERS RIN RD Address: 7/2 COLD STREAM COURT
City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: WINTER SPRINGS, FL 32708

Title: DS () Change (X) Addition

 Name:
 Name:
 STEWART, GINA

 Address:
 Address:
 926 WILLOW RUN LANE

 City-St-Zip:
 City-St-Zip:
 WINTER SPRINGS, FL 32708

I hereby certify that the information supplied with this filing does not qualify 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: LILLIAN B. PHELPS DT 04/01/2009