2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007
Secretary of State

DOCUMENT# N39132

Entity Name: WILLOWOOD HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1299 WILLOWWOOD CIR
GULF BREEZE, FL 32563

New Principal Place of Business:

Current Mailing Address:

1299 WILLOWWOOD CIR
GULF BREEZE, FL 32563 US

New Mailing Address:

FEI Number: 59-3140181 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAWYER, RICHARD P
1221 WILLOWOOD LANE
GULF BREEZE, FL 32563 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 ( ) Delete
Name: BRACKEN, LARRY V
Address: 1133 WILLOWOOD CIRCLE
City-St-Zip: GULF BREEZE, FL 32563

Title: TD ( ) Delete
Name: SAWYER, RICHARD
Address: 1221 WILLOWOOD LANE
City-St-Zip: GULF BREEZE, FL 32563

Title: D ( ) Delete
Name: HARRIS, LOIS
Address: 1120 WILLOWOOD CIRCLE
City-St-Zip: GULF BREEZE, FL 32563

Title: SD ( ) Delete
Name: O'CONNELL, CAROLYN
Address: 1112 WILLOWOOD CIRCLE
City-St-Zip: GULF BREEZE, FL 32563

Title: VD ( ) Delete
Name: ROWE, ROGER
Address: 1205 WILLOWOOD LANE
City-St-Zip: GULF BREEZE, FL 32563

Title: D ( ) Delete
Name: COLLETT, ANNIE
Address: 3651 WILLOWOOD CIRCLE
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change ( ) Addition
Name: SAWYER, RICHARD P
Address: 1221 WILLOWOOD LANE
City-St-Zip: GULF BREEZE, FL 32563

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

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

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

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: RICHARD P SAWYER TD 02/05/2007

Electronic Signature of Signing Officer or Director — Date