

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004744

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** WILLA OAKS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

LINGO CIRCLE & COURT  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

1008 LINGO CIRCLE  
OVIEDO, FL 32765

**New Mailing Address:**

**FEI Number:** 59-3229792

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALKER, TODD  
1014 LINGO CIR.  
OVIEDO, FL 32765 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: D ( ) Delete  
Name: WALKER, KIERSTEN  
Address: 1014 LINGO CIR.  
City-St-Zip: OVIEDO, FL 32765

Title: P ( ) Delete  
Name: SAUNDERS, ROBERT  
Address: 1010 LING CIRCLE  
City-St-Zip: OVIEDO, FL 32765

Title: D ( ) Delete  
Name: MANNING, MARIA  
Address: 1007 LINGO CIRCLE  
City-St-Zip: OVIEDO, FL 32765

Title: S ( ) Delete  
Name: POPOVICH, PATSY  
Address: 1000 LINGO CIRCLE  
City-St-Zip: OVIEDO, FL 32765

Title: T ( ) Delete  
Name: WINCHESTER, BILL  
Address: 1008 LINGO CIRCLE  
City-St-Zip: OVIEDO, FL 32765

Title: D ( ) Delete  
Name: FIEDLER, ROBERT  
Address: 902 LINGO COURT  
City-St-Zip: OVIEDO, FL 32765

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SPENCER, PEGGY  
Address: 1002 LINGO CIRCLE  
City-St-Zip: OVIEDO, FL 32765

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:

Title: D (X) Change ( ) Addition  
Name: FAIN, CAROL  
Address: 906 LINGO CT  
City-St-Zip: OVIEDO, FL 32765

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: WILLIAM H WINCHESTER

TRES

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date