2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2012
Secretary of State

DOCUMENT# N97000002725

Entity Name: WILLOW BEND AT STONEBRIDGE CONDOMINIUM ASSOCATION, INC.

Current Principal Place of Business:

C. ALLEN PROPERTIES
3050 N. HORSESHOE DR
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C. ALLEN PROPERTIES
3050 N. HORSESHOE DR
NAPLES, FL 34104

New Mailing Address:

FEI Number: 65-0756604 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALLEN, CHARLES
3050 N. HORSESHOE DR #172
NAPLES, FL 34104 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
Name: GEHRLEIN, DALE
Address: 1940 WILLOWBEND CIRCLE #103
City-St-Zip: NAPLES, FL 34109

Title: VPD
Name: BOWLES, JAMES
Address: 1920 WILLOWBEND CR #202
City-St-Zip: NAPLES, FL 34109

Title: D
Name: CORDELL, JEFFREY
Address: 1950 WILLOWBEND CIRCLE #203
City-St-Zip: NAPLES, FL 34109

Title: DT
Name: MANFREDONIDA, LEO
Address: 1970 WILLOWBEND CIRCLE #204
City-St-Zip: NAPLES, FL 34109

Title: SD
Name: FAHY, TOM
Address: 1980 WILLOWBEND CIRCLE #202
City-St-Zip: NAPLES, FL 34109

I hereby 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 all other like empowered.

SIGNATURE: DALE GEHRLEIN PD 03/21/2012

Electronic Signature of Signing Officer or Director — Date