

# 2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # N97000003806

1. Entity Name

WILLOW CREEK HOMEOWNERS ASSOCIATION, INC.

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**FILED**  
**Jun 21, 2000 8:00 am**  
**Secretary of State**

05-18-2000 90383 045 \*\*\*\*61.25

Principal Place of Business 3632 NW 31ST TERR GAINESVILLE FL 32605 US	Mailing Address 3632 NW 31ST TERR GAINESVILLE FL 32605-2171 US
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2. Principal Place of Business 3722 NW 33rd Terrace Suite, Apt. #, etc.	3. Mailing Address 3722 NW 33rd Terrace Suite, Apt. #, etc.
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City & State Gainesville, FL	City & State Gainesville, FL	4. FEI Number 59-3451091	Applied For <input type="checkbox"/> Not Applicable
Zip 32605	Country USA	Zip 32605	Country USA

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  MATTHEW, KEILAN 3632 NW 31 TERR GAINESVILLE FL 32605	7. Name and Address of New Registered Agent Name George A. McDavid Street Address (P.O. Box Number is Not Acceptable) 3722 NW 33rd Terrace City Gainesville FL Zip Code 32605
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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 George A. McDavid, Treasurer <small>Signature, typed or printed name of registered agent and title if applicable</small>
<small>(NOTE: Registered Agent signature required when reinstating)</small>
DATE 04/28/00

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CLEMENTS, KEN 3644 NW 33RD TERR. GAINESVILLE FL 32605 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Carol Coe 3619 NW 33rd Terrace Gainesville, FL 32605 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MATTHEW, KEILAH 3632 NW 31ST TERR GAINESVILLE FL 32605 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President Chris Brazda 3421 NW 32nd Drive Gainesville, FL 32605 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FORBUSH, TRUDI 3701 NW 33RD TERR. GAINESVILLE FL 32605 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer George A. McDavid 3722 NW 33rd Terrace Gainesville, FL 32605 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 trustee 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.	
SIGNATURE: <b>SIGNATURE OF REGISTERED AGENT</b> George A. McDavid, Treasurer	DATE 04/28/00 DAYTIME PHONE 352-376-3419

CR2E037 (9/99)