2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005292

FILED Apr 12, 2006 Secretary of State

Entity Name: WILLOW RUN HOMEOWNERS ASSOCIATION OF LAKELAND, INC.

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 5076 LAKELAND, FL 338075076 **Current Mailing Address: New Mailing Address:** P.O. BOX 5076 LAKELAND, FL 338075076 FEI Number: 59-3533587 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: SCHREIBER, ALLAN 7002 WILLOW RUN LOOP LAKELAND, FL 33813 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete SCHREIBER, ALLAN GENSIEJEWSKI, DAVID Name: Name: 7002 WILLOW RUN LOOP Address: 714 WILLOW RUN Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33813 Title: () Delete Title: (X) Change () Addition BROEDEL, JOHN MARON, LAWRENCE Name: Name: Address: 509 WILLOW RUN KNOLL Address: 721 WILLOW RUN City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33813 Title: () Delete Title: (X) Change () Addition ROWELL, JOYCE SAENZ, KAREN Name: Name: 7008 WILLOW RUN LOOP 516 WILLOW RUN KNOLL Address: Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33813 Title: VΡ (X) Delete Title: () Change () Addition Name: COOLE, KEVIN Name: Address: 616 WILLOW RUN Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: Title: BMD () Delete Title: () Change () Addition CARLON, CORLETTA Name: Name: 720 WILLOW RUN Address: Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: Title: **BMD** () Delete Title: (X) Change () Addition

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.

Name:

Address:

City-St-Zip:

GENSIEJEWSKI, CINDY

LAKELAND, FL 33813

714 WILLOW RUN

SIGNATURE: DAVID GENSIEJEWSKI P 04/12/2006

WESTON, ANNA

633 WILLOW RUN

LAKELAND, FL 33813

Name:

Address:

City-St-Zip: