2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State
03-06-2002 90063 039 ****61.25

DOCUMENT # N99000003035

1. Entity Name

WILLOW BROOK AT PARKER LAKES II CONDOMINIUM ASSOCIATION, INC.

B00011491

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
~~GLADIOLUS DRIVE~~ ~~100~~ ~~MYERS FL 33908~~	~~9400 GLADIOLUS DRIVE~~ ~~SUITE 100~~ ~~FORT MYERS FL 33908~~ C/o P+M Property Management
2. Principal Place of Business c/o P+M Property Management	3. Mailing Address
Suite, Apt. #, etc. 15660 San Carlos Blvd #40	Suite, Apt. #, etc. 15660 San Carlos Blvd. #40
City & State Ft. Myers, FL	City & State Ft. Myers, Fl
Zip 33908 Country USA	Zip 33908 Country USA

4. FEI Number 65-0842955 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~O'NEILL, ARLENE~~ ~~9400 GLADIOLUS DRIVE~~ ~~STE 100~~ ~~FORT MYERS FL 33919~~	Name: Lori Ann Ayers Street Address (P.O. Box Number is Not Acceptable): 15660 San Carlos Blvd. #40 City: Ft. Myers FL Zip Code: 33908

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: Lori Ann Ayers. Lori Ann Ayers, Manager 1/21/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HENNESSY, CLAUDIA A ~~14550 DAFFODIL DRIVE, #1004~~ ~~FORT MYERS FL 33919~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 15660 San Carlos Blvd. #40 Ft. Myers, Fl 33908
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD PERRY, ROBIN W ~~14500 DAFFODIL DRIVE, #1103~~ ~~FORT MYERS FL 33919~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 15660 San Carlos Blvd. #40 Ft. Myers, Fl 33908
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD FOX, MARY ALICE ~~14500 DAFFODIL DRIVE, #1102~~ ~~FORT MYERS FL 33919~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 15660 San Carlos Blvd. #40 Ft. Myers, Fl 33908
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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: Lori Ann Ayers Lori Ann Ayers, Manager 1/21/02 (941) 481-1577
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

SIGNATURE REQUIRED