

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003035

FILED
Apr 06, 2009
Secretary of State

Entity Name: WILLOW BROOK AT PARKER LAKES II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER RD, SUITE 200
FORT MYERS, FL 33919 US

New Principal Place of Business:

C/O ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD, SUITE 200
FORT MYERS, FL 33919 US

Current Mailing Address:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER RD, SUITE 200
FORT MYERS, FL 33919 US

New Mailing Address:

C/O ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD, SUITE 200
FORT MYERS, FL 33919 US

FEI Number: 65-0842955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLIANT PROPERTY MANAGEMENT
6719 WINKLER RD, SUITE 200
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD
SUITE 200
FORT MYERS, FL 33919 US

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: JOHN M. STROHM, AGENT

04/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHREINER, DOROTHY
Address: 14570 DAFFODIL DRIVE SUITE 803
City-St-Zip: FORT MYERS, FL 33919

Title: VP (X) Delete
Name: HAHLEBECK, CAROL
Address: 14560 DAFFODIL DR #904
City-St-Zip: FORT MYERS, FL 33919

Title: S () Delete
Name: FOX, MARY ALICE
Address: 14500 DAFFODIL DR # 1102
City-St-Zip: FORT MYERS, FL 33919

Title: T () Delete
Name: CUMMINS, JACQUELINE
Address: 14580 DAFFODIL DRIVE SUITE 701
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: PECKHAM, JUDY
Address: 14550 DAFFODIL DRIVE, #1007
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHREINER, DOROTHY
Address: 14570 DAFFODIL DRIVE # 803
City-St-Zip: FORT MYERS, FL 33919

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: FOX, MARY ALICE
Address: 14500 DAFFODIL DRIVE # 1102
City-St-Zip: FORT MYERS, FL 33919

Title: TD (X) Change () Addition
Name: CUMMINS, JACKIE
Address: 14580 DAFFODIL DRIVE #701
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Change () Addition
Name: PECKHAM, JUDY
Address: 14550 DAFFODIL DRIVE #1007
City-St-Zip: FORT MYERS, FL 33919

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: DOROTHY SCHREINER

PD

04/06/2009

Electronic Signature of Signing Officer or Director

Date