2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2010
Secretary of State

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

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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, LLC
6719 WINKLER ROAD
SUITE 200
FORT MYERS, FL 33919 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: SCHREINER, DOROTHY
Address: 14570 DAFFODIL DRIVE # 803
City-St-Zip: FORT MYERS, FL 33919

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

Title: TD
Name: GRABE, PAMELA
Address: 14580 DAFFODIL DRIVE #703
City-St-Zip: FORT MYERS, FL 33919

Title: VP
Name: PECKHAM, JUDY
Address: 14550 DOFFODIL DRIVE #1007
City-St-Zip: FORT MYERS, FL 33919

Title: D
Name: SINCLAIR, MARY ANN
Address: 14550 DAFFODIL DRIVE #1001
City-St-Zip: FT. MYERS, FL 33919

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: PAMELA GRABE TD 04/15/2010

Electronic Signature of Signing Officer or Director Date