

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90056 048 ****61.25

DOCUMENT # N99000003927

1. Entity Name
WILLOWCROFT OWNERS ASSOCIATION, INC.



Principal Place of Business
2321 N.W. 41ST STREET STE A-2
GAINESVILLE, FL 32606

Mailing Address
2321 N.W. 41ST STREET STE A-2
GAINESVILLE, FL 32606

50014432



01102005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3607826

Applied For
Not Applicable

Zip

Country

Zip

Country

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

SPAIN, THOMAS C
2321 N.W. 41ST STREET STE A-2
GAINESVILLE, FL 32606

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP ☐ Delete
NAME SPAIN, THOMAS C
STREET ADDRESS 2321 N.W. 41ST STREET STE A-2
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DV ☐ Delete
NAME SPAIN, SUSAN B
STREET ADDRESS 2321 N.W. 41ST STREET STE A-2
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DST ☒ Delete
NAME HUGGINS, J A
STREET ADDRESS 2321 N.W. 41ST STREET STE A-2
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE DST ☒ Change ☐ Addition
NAME COOPER, MICHAEL J.
STREET ADDRESS 2321 N.W. 41ST ST.
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Susan B. Spain VP SUSAN B. SPAIN

2/4/05

352-376-4512

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #