

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2005 8:00 am
Secretary of State

08-31-2005 90012 048 ****61.25

DOCUMENT # N99000004776 1. Entity Name WILLOW BROOK AT PARKER LAKES III CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 6213-A PRESIDENTIAL CT FT. MYERS, FL 33919			Mailing Address 6213-A PRESIDENTIAL CT FT. MYERS, FL 33919		
2. Principal Place of Business 8270 College Pkwy #103 Suite, Apt. #, etc.		3. Mailing Address 8270 College Pkwy #103 Suite, Apt. #, etc.			
City & State FT. MYERS, FL.		City & State FT. MYERS, FL.		4. FEI Number 65-0969533	
Zip 33919		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HENKE, CAROL J 6213-A PRESIDENTIAL CT FT. MYERS, FL 33919				7. Name and Address of New Registered Agent Name George Tenague Street Address (P.O. Box Number is Not Acceptable) 8270 College Pkwy #103 City FT. MYERS FL Zip Code 33919	
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  (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 NAME STREET ADDRESS CITY-ST-ZIP	STD BUTLER, BERNADINE 14571 DAFFODIL DRIVE #2002 FORT MYERS, FL 33919	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MERSL, JOSEPH 14571 DAFFODIL DR #2005 FORT MYERS, FL 33919	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ADAMS, RUSSELL 14571 DAFFODIL DRIVE #1805 FORT MYERS, FL 33919	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANNING, BILL 14551 DAFFODIL DR #1806 FT MYERS, FL 33919	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REYNOLDS, WARREN 14581 DAFFODILE DR #2106 FT MYERS, FL 33919	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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 fee empowered.					
SIGNATURE: 			8-24-05 239-415-7400 Date Daytime Phone #		