2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000083022

Entity Name: WILLA SPRINGS OFFICE PARK, INC.

FILED Jun 30, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

1035 S. SEMORAN BLVD. 1060 WILLA SPRINGS DR

SUITE 1019 WINTER SPRINGS, FL 32708 US

WINTER PARK, FL 32792 US

Current Mailing Address: New Mailing Address:

1035 S. SEMORAN BLVD. 1060 WILLA SPRINGS DR

SUITE 1019 WINTER SPRINGS, FL 32708 US WINTER PARK, FL 32792 US

FEI Number: 55-0844167 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PLOWFIELD, ROBERT L JR. 1035 S. SEMORAN BLVD. SUITE 1019 WINTER PARK, FL 32792 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D () Delete Title: P, D (X) Change () Addition Name: PLOWFIELD, ROBERT L JR. Name: PLOWFIELD, ROBERT L JR. Address: 1035 S. SEMORAN BLVD., SUITE 1019 Address: 1060 WILLA SPRINGS DR

Address: 1035 S. SEMORAN BLVD., SUITE 1019 Address: 1060 WILLA SPRINGS DR
City-St-Zip: WINTER PARK, FL 32792 US City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: VP () Delete Title: VP (X) Change () Addition

Name: PLOWFIELD, CHRISTA J
Address: 1035 S. SEMORAN BLVD., SUITE 1019
City-St-Zip: WINTER PARK, FL 32792 US

Name: PLOWFIELD, CHRISTA J
Address: 1060 WILLA SPRINGS DR
City-St-Zip: WINTER SPRINGS, FL 32708 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTA PLOWFIELD VP 06/30/2005