## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000014182 (4)

WILLOW RUN HOUSING II, INC.

Principal Place of Business		Mailing Address		a tokuldar ska skiet chart datet datet datet datet andet tidet in bit i fert i	101
950 NORTH ORLANDO AVENUE		950 NORTH ORLANDO AVI	ENUE		
SUITE 320 WINTER PARK FL 32789		SUITE 320		DO NOT WRITE IN THIS SPACE	
WINIER PARK	TL SEFOS	STELL PRINT - P-05104-		3. Date Incorporated or Qualified	
				02/13/1997	
2. Principal P	lace of Business	2a, Mailing Address	1	4, FEI Number Applied	For
21		26 1.0 BOX	4961	59 - 3436382 Not App	licable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additio	nal
22		27		Fee Required	1
City & State	9	City & State	FL	Election Campaign Financing \$5.00 May E	
23	1 2	28 Orlanda	<u> </u>	Trust Fund Contribution L Added to Fee	
Zip	Country	Zip 200 2 (6) 1	Country	8. This corporation owes or has paid the current year Intangible	e
24	25 9. Name and Address of Curre		30 USAF	Personal Property Tax due June 30. Yes No.  10. Name and Address of New Registered Agent	
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 8				IQ. return site verseas at trest traditional vicent	
		DENTRAL FLORIDA	81 Name		
390 NORTH ORANGE AVENUE SUITE 1100			82 Street	Address (P.O. Box Number is Not Acceptable)	
	LANDO FL 32801		83		
Ofw	DANDO 1 E 02001				
			84 City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	s, the above-named	cornoration submits this statement for the purpose of changing its regis	stered
office or re	egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change was au	thorized by the corp	poration's board of directors. I hereby accept the appointment as registr	ered
·	m aminar with, and accept the oblig	ganoris or, Section 007.0000, Flori	sua Statutes.		
SIGNATURE	Signature typed or printed name of registered as	gent and title if applicable (NOTE:	Registered Agent signature	required when reinstating) DATE	—
12.	OFFICERS AF	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2
TITLE	D	☐ DELETE	1.1 TITLE	D/P Change D	Addition
NAME	PALMER, CHARLES B		1.2 NAME	Charles B. Palmer	
STREET ADDRESS	950 N ORLANDO AVE, STE	320	1,3 STREET ADDRESS	950 N. Orlando Ave., Ste. 320	
CITY - ST - ZIP	WINTER PARK FL 32789		1.4 CITY-ST-ZIP	Winter Park El 32780	
TITLE	D	☐ DELET <b>E</b>	2.1 TITLE	D/VP Change	Addition
NAME	BOBINCHUCK, ROBERT M		2.2 NAME	Robert M. Bobinchuck	
STREET ADDRESS	100 CONGRESS AV, STE 10	10	2.3 STREET ADDRESS	100 Congress Ave., Ste. 1010	
CITY-ST-ZIP	AUSTIN TX 78701		2.4 CITY-ST-ZIP	Austin, TC 78701	
TITLE		☐ DELETE	3.1 TITLE	VP LI Change LX	Addition
NAME			3.2 NAME	Rick Devoe	
STREET ADDRESS			3.3 STREET ADDRESS	100 Congress Ave., Ste. 1010 Austin, T. 78701	
CITY-ST-ZIP		- Ocuser	3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE	— · —	Addition
NAME			4. 2 NAME	Preston Perrone	
STREET ADDRESS			4.3 STREET ADDRESS	950 N. Orlando Ave., Ste. 320	
CITY+ST-ZIP		T DELETE	4.4 City-St-ZiP	Winter Park, FL 32789	ddition
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ A	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DOLLETE	5.4 CITY-ST-ZIP	[] <sub>Ch</sub>	Addition
TITLE		☐ DELET <b>E</b>	6.1 TITLE	L] Change L] A	wallion
NAME			6.2 NAME		ļ
STREET ADDRESS			6.3 STREET ADDRESS		

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changey, orion an attackingtent with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

Bracton Dorrona Vica Presient

(407)628-4544

**FILED** 

Mar 26 1998 8:00am

Secretary of State