

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004197

Entity Name: WILLOW GLEN HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5788 SHADY GLEN COURT
PACE, FL 32571**Current Mailing Address:**PO BOX 3439
MILTON, FL 32572 US**FEI Number:** 27-2490680**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LOCKLIN, OSCAR J
4557 CHUMUCKLA HWY.
PACE, FL 32571 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**Officer/Director Detail :**

Title	PRESIDENT
Name	MANN, MELISSA
Address	5840 PESCARA DR.
City-State-Zip:	PACE FL 32571

Title	VICE-PRESIDENT
Name	GASKINS, DONNA
Address	3958 WILLOW GLEN DR.
City-State-Zip:	PACE FL 32571

Title	TREASURER
Name	MCMILLEN, JAMES
Address	5788 SHADY GLEN CT.
City-State-Zip:	PACE FL 32571

Title	SECRETARY
Name	FRANTZ, PAT
Address	5801 SHADY GLEN CT.
City-State-Zip:	PACE FL 32571

Title	DIRECTOR AT LARGE
Name	VACANT, VACANT
Address	5788 SHADY GLEN CT.
City-State-Zip:	PACE FL 32571

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: JAMES MCMILLEN**TREASURER****01/23/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date