

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727259

FILED  
Apr 03, 2012  
Secretary of State

**Entity Name:** WINDMILL POINTE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2719 WESTBURY AVENUE  
WPHOA PRESIDENTS' ADDRESS  
PALM HARBOR, FL 34685 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 364  
OLDSMAR, FL 34677 US

**New Mailing Address:**

**FEI Number:** 59-1762193

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BUSH/ROSS--STEVEN H. MEZER (ATTORNEY)  
1801 NORTH HIGHLAND AVENUE  
TAMPA, FL 33602 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** TUOHY, GREG  
**Address:** 2719 WESTBURY AVENUE  
**City-St-Zip:** PALM HARBOR, FL 34685

**Title:** V.P.  
**Name:** WRIGHT, MITCH  
**Address:** 2714 WILTSHIRE AVE.  
**City-St-Zip:** PALM HARBOR, FL 34685

**Title:** TRES  
**Name:** HIGNEY, MICHAEL  
**Address:** 1512 WINDMILL POINTE RD.  
**City-St-Zip:** PALM HARBOR, FL 34685

**Title:** DIR  
**Name:** REMSEN, KATHLEEN  
**Address:** 2828 WENDOVER TERRACE  
**City-St-Zip:** PALM HARBOR, FL 34685

**Title:** DIR  
**Name:** FORNWALT, ROBERT  
**Address:** 2695 WOODHALL TERRACE  
**City-St-Zip:** PALM HARBOR, FL 34685

**Title:** DIR  
**Name:** CASSICK, SANDRA  
**Address:** 2520 WOODCOTE TER.  
**City-St-Zip:** PALM HARBOR, FL 34685

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:** SANDRA CASSICK

DIR

04/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date