FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

738981

(0)

WINDING WOOD CONDOMINIUM VII ASSOCIATION, INC.

Principal Place of Business	Mailing Address
552 MAIN ST	552 MAIN ST
SAFETY HARBOR FL 34695	SAFETY HARBOR

FILED Feb 19 1997 8:00am Secretary of State



552 MAIN ST SAFETY HARBOR FL 34695 552 MAIN ST SAFETY HARBOR FL 34695 SAFETY HARBOR FL 34695-35		34895-3549								
						3. Date Incorporated or Qualified 05/09/1977		of Last Re 2/14/19		
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		I An	plied For	
21		26				59-1743509			Applicable	
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State City & State					· · · · · · · · · · · · · · · · · · ·	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country Zip Country			ntrv						
24	25	29	├─ ─ ─			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	9. Name and Address of Curr		1301			10. Name and Address of New R				
·····				81	Name		. 			
1										
MEZER, STEVEN H P.A. 1212 COURT ST										
S-B				83		!			1	
CLEARWATER FL 34616				84	City		FL	85 Zip (Code	
office or re	o the provisions of Sections 617.0 egistered agent, or both, in the Sta n familiar with, and accept the ob	ate of Florida. Such change v	vas authorized	l by th	named corpo he corporation	oration submits this statement for the on's board of directors. I hereby accepts	purpose of c pt the appoir	nanging it ntment as	s registered registered	
SIGNATURE _										
	Signature typed or printed name of registered			Agent	signature require	d when reinstating)	DATE	UDCOTOC		
12.		AND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFI			Addition	
TITLE	\$	C DECEIE					ــا	Change	L.J Addition	
NAME	HODGES, JOAN		1.2 NA							
			1		ODRESS				ļi,	
CITY-ST-ZIP	CLEARWATER, FL 0	Florier		Y-ST-	ZIP		····	7.05	Addition	
TITLE	VD	DELETE				•	Ļ	Change	Addition	
NAME	HERMAN, NORMAN		2.2 NA			:				
STREET ADDRESS				ŒET A£	DORESS				1	
GITY - ST - ZIP	CLEARWATER FL			TY-ST-	- ZIP			- 	4.440	
TITLE	D	DELETE					L	_ Change	Addition	
NAME	MARTIN, NANCY		3.2 NA	ME		•			Į.	
STREET ADDRESS	2720 SANDHOLLOW COU	RT	3.3 ST	REET AL	DDRESS					
CITY-ST-ZIP	CLEARWATER FL			TY-ST-	-ZIP		······	.		
TITLE	PD	DELETE	4.1 T(T	LE			L.	_] Change	Addition	
NAME	WOLFE, JEAN		4.2 N	ME						
STREET ADDRESS	2714 SAND HOLLOW CT		4.3 ST	REET AL	DORESS				1	
City-St-ZiP	CLEARWATER, FL 00000			Y-51-	ZIP					
THTLE	Ţ	☐ DELETE	5.1 TIT	LE				Change	Addition	
NAME	Daley, Debrah		5.2 NA	ME			1			
STREET ADDRESS	2701 SAND HOLLOW CT		5.3 ST	REET AC	DORESS					
CITY-ST-ZIP	CLEARWATER, FL 00000		5.4 CIT	Y-\$T-	ZIP					
TITLE		DELETE	6.1 TIT	LE			L	Change	Addition	
NAME			6.2 NA	ME						
STREET ADDRESS					DDRESS					
CITY-ST-ZIP				Y-ST-	1					
	ov certify that the information supp	lied with this filing does not a				in Section 119.07(3)(i), Florida Statut	es. I further c	ertify 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

726-2329 Daytime Phone # 0069257