2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #738981

1. Entity Name

WINDING WOOD CONDOMINIUM VII ASSOCIATION, INC.

FILED May 04, 2000 8:00 am Secretary of State

05-04-2000 90124 048 ****61.25

Principal Pla	ce of Business	Mailing Address		/					
7859 tr	LMERTON ROAD 7	850 ULMERTO	N ROAD	1					
, 000 02122112011 110112		SUITE 1			6 2 9 9 0 9				
LARGO, FL 33771 LARGO, FL 33			771		652203				
,									
2. Principal	Place of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State		4.	FO 1742500		oplied For		
								ot Applicable	
Zip	Country	Zip	Country	5.	Certificate of Status Desired		iee Require		
	6. Name and Address of Current Re	istered Agent	(7.	Name and Address of New Re				
		,	Name			<u> </u>	<u></u>		
STEVEN H. MEZER, P.A.			Street (Street Address (P.O. Box Number is Not Acceptable)					
	OURT STREET, SUITE	В	- Silvery			,			
CLEARW	ATER, FL 33756								
			City				Zip Cod	e	
						FL	<u></u>		
8. The above	e named entity submits this statement for th	e purpose of changing its	registered office o	or registered ag	gent, or both, in the state of Flor	ida.		ſ	
					1.				
CIONATURE	-								
SIGNATURE	Signature, typed or printed name of registered agent and t	tle if applicable (NO)	E: Registered Agent signa	ature required when r	reinstating)	DATE			
Section 1						2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	新华的民族		
	FILE NOW:	9. Election Campaign	n Financing	\$5.00 ма	av Re Make	Check P	avable to	1	
	FEE IS \$61.25	Trust Fund Contrib		Added to F		oartment (
10.	OFFICERS AND DIREC		11.	ADDI	TIONS/CHANGES TO OFFICER				
TITLE	PD	Delete	TITLE	} · ·	•		☐ Change	☐ Addition	
NAME STREET ADDRESS	MICHAEL COLE	NAMÉ STREET ADDRESS							
CITY-ST-ZIP	ZIII SAND DOLLOW C	CITY-ST-ZIP	1	,					
TITLE	CLEARWATER, FL 33	☐ Defete	TITLE	 			☐ Change	Addition	
NAME	JUDY MAXSON	□ Deidle	NAME				Onlings		
STREET ADDRESS	2763 SAND HOLLOW C	STREET ADDRESS	}				}		
CITY-ST-ZIP		761	CITY-ST-ZIP						
TITLE	SD -	☐ Delete	TITLE				Change	☐ Addition	
NAME	MARCIA DOOHEN		NAME	1					
STREET ADDRESS	2741 SAND HOLLOW C	COURT	STREET ADDRESS						
CITY-ST-ZIP	CLEARWATER, FL 33		CITY-ST-ZIP	<u> </u>					
TITLE	TD	☐ Delete	TITLE	TD			☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS		MCGREW	In th			
CITY-ST-ZIP	ĺ		CITY-ST-ZIP	Z 100 3.	AND HOLLOW COU				
TITLE	<u></u>	☐ Delete	TITLE	LILEARW	ATER, FL 3376		Change	Addition	
NAME	D CAROL BEREZ HINARO		NAME			'	Onungo		
STREET ADDRESS	CAROL PEREZ FUNARO		STREET ADDRESS	-					
CITY-ST-ZIP	CLEARWATER, FL 33		CITY-ST-ZIP			_			
TITLE	CDBARWALERY FD - 33	☐ Delete	TITLE				Change	☐ Addition	
NAME			NAME	ľ					
STREET ADDRESS	1		STREET, ADDRESS	· •	•			-	

12. I hereby certify that the information supplied with this filling does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Shelen Lob

Michael Cole, Pres

727.530.4517