## 2004 NOT-FOR-PROFIT CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF S

## Apr 26, 2004 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # N01000002394 04-26-2004 90456 044 \*\*\*\*61.25 WINDERMERE RIDGE HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 5695 BEGGS ROAD 5695 BEGGS ROAD SUITE B-100 SUITE B-100 ORLANDO, FL 32810 ORLANDO, FL 32810 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 04152004 Cha-NP CR2E037 (10/03) City & State City & State 4. FEI Number 01-0576659 Applied For Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SUTHERLAND, THERESA D 5695 BEGGS ROAD Street Address (P.O. Box Number is Not Acceptable) SUITE B-100 ORLANDO, FL 32810 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. j SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filling Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Due by May 1, 2004 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE ☐ Change HOFFORD, JAMES M JR. Greco, Rechard NAME NAME 6355 Metro West Blyd., Sufte 260 Orlando, FL 32835 STREET ADDRESS 1800 33RD ST STE 100 STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32839 CITY-ST-7IP VD TITLE Anny Krehad An Delete TITLE BROWN, KAREN MARKE NAME 6355 Metro West Blvd., Sufte 260 STREET ADDRESS 1800 33RD ST STE 100 STREET ADDRESS ORLANDO, FL 32839 CITY-ST-ZIP CITY-ST-71P Oclanda, FL 32835 or DiFiore TITLE Delete MILE LOVE, LISA A NAME NAME 6355 Metro West Blvd, Sufte 260 Orlando, FL 32835 1800 33RD ST STE 100 STREET ADDRESS STREET ADDRESS ORLANDO, FL 32839 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete DITE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P 12. 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 report of 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 charged, or on an attachment with any address, with all pured.

IG OFFICER OR DIRECTOR

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