### 2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

#### DOCUMENT # N05000009801

WINTER PARK VILLAS CONDOMINIUM ASSOCIATION. INC.



Principal Place of Business

1801 COOK AVENUE ORLANDO, FL 32806 Mailing Address

1801 COOK AVENUE ORLANDO, FL 32806

# **FILED** May 12, 2008 8:00 am Secretary of State

05-12-2008 90027 003 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04222008 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-3818286

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

**DON ASHER & ASSOC** 1801 COOK AVENUE ORLANDO, FL 32806

## DO NOT WRITE IN THIS SPACE

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.						
SIGNATURESignature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
	Signature, typed or printed name or registered agent and	inte ii applicable. (NOTE: Hegistered	Agent signature r	equired when reinstating)	DATE	
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Finance     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KUNATH, ROBERT 685 GRENADINE CT. WINTER PARK, FL 32792					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPDT JERMIN, CHRSITINE 650 MONTEGO BAY CT WINTER PARK, FL 32792					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BROWN, PATRICK J 634 ST JOHN'S CT WINTER PARK, FL 32792		,	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 empelyered 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 addrags, with all other like emproyered.						