

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 02, 2009  
Secretary of State**

DOCUMENT# N05000009801

**Entity Name:** WINTER PARK VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1801 COOK AVENUE  
ORLANDO, FL 32806

**New Principal Place of Business:**

**Current Mailing Address:**

1801 COOK AVENUE  
ORLANDO, FL 32806

**New Mailing Address:**

**FEI Number:** 20-3818286      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DON ASHER & ASSOC  
1801 COOK AVENUE  
ORLANDO, FL 32806      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: PD      ( ) Delete  
Name: KUNATH, ROBERT  
Address: 685 GRENADINE CT.  
City-St-Zip: WINTER PARK, FL 32792

Title: VPDT      (X) Delete  
Name: JERMIN, CHRISITINE  
Address: 650 MONTEGO BAY CT  
City-St-Zip: WINTER PARK, FL 32792

Title: SD      ( ) Delete  
Name: BROWN, PATRICK J  
Address: 634 ST JOHN'S CT  
City-St-Zip: WINTER PARK, FL 32792

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT KUNATH

PD

02/02/2009

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

\_\_\_\_\_  
Date