

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90040 050 ****70.00

DOCUMENT # N06724

1. Entity Name

WINDTREE PROFESSIONAL CENTER CONDOMINIUM ASSOCIA

Principal Place of Business

Mailing Address

13330 W COLONIAL DR
 SUITE 130
 WINTER GARDEN FL 34787
 US

13330 W COLONIAL DR
 SUITE 130
 WINTER GARDEN FL 34787-3985
 US

HANDWRITTEN



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #: etc.

Suite, Apt. #: etc.

City & State

City & State

4. FEI Number

59-3417469

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MASHBURN, ESQ., ERIC S
 102 EAST MAPLE STREET
 WINTER GARDEN FL 34787

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Delete
 NAME FOLSOM, LYNN M
 STREET ADDRESS ~~13340 W. COLONIAL DR., #250~~ *change address*
 CITY-ST-ZIP WINTER GARDEN FL 34787

TITLE Change Addition
 NAME
 STREET ADDRESS 13330 W. COLONIAL DR., #130
 CITY-ST-ZIP

TITLE VD Delete
 NAME CANOLE, WILLIAM L
 STREET ADDRESS 8943 BAY COVE COURT
 CITY-ST-ZIP ORLANDO FL 32819

TITLE VD Change Addition
 NAME GENE COWART
 STREET ADDRESS 310 S. DILLARD STREET
 CITY-ST-ZIP WINTER GARDEN, FL 34787

TITLE STD Delete
 NAME LACEY, JOANN
 STREET ADDRESS ~~13340 W. COLONIAL DRIVE~~ *change address*
 CITY-ST-ZIP WINTER GARDEN FL 34787

TITLE Change Addition
 NAME
 STREET ADDRESS 13330 W. COLONIAL DR., #130
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 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:

[Handwritten Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/06/2000

407-877-0505

Date

Daytime Phone #