2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25945

FILED Apr 25, 2005 Secretary of State

Entity Name: WINGROVE ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 1323

WINDERMERE, FL 34786 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1323

WINDERMERE, FL 34786 US

FEI Number: 59-2903158 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ELLIOTT, STEPHEN M

8021 LANDGROVE CT.
ORLANDO, FL 32819 US

LOWRY, H. CLAY

8015 LANDGROVE CT.
ORLANDO, FL 32819 US

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: H. CLAY LOWRY 04/25/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: ELLIOTT, STEPHEN Name: RAYMOR, STEPHEN

 Name:
 EEEIOTT, STEFFIEN

 Address:
 8021 LANDGROVE CT.

 City-St-Zip:
 ORLANDO, FL 32819

 City-St-Zip:
 ORLANDO, FL 32819

Title: VPD () Delete Title: VPD (X) Change () Addition Name: STAUFFER, CINDY Name: DENOMME, STEPHEN

Address: 8003 LANDGROVE CT Address: 4843 WINGROVE BLVD City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete Title: () Change () Addition

 Name:
 CHIRAFISI, MANDY
 Name:

 Address:
 4831 WINGROVE BLVD.
 Address:

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:

Name:LOWRY, CLAYName:LOWRY, H. CLAYAddress:8015 LANDGROVE CTAddress:8015 LANDGROVE CTCity-St-Zip:ORLANDO, FL 32819City-St-Zip:ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the 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 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: H. CLAY LOWRY T 04/25/2005