

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40073

FILED
Mar 23, 2009
Secretary of State

Entity Name: WINDING CREEK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1801 COOK AVENUE
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

1801 COOK AVENUE
ORLANDO, FL 32806 US

New Mailing Address:

FEI Number: 59-3111368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DON ASHER AND ASSOCIATES, INC.
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: S () Delete
Name: KOFFINAS, SANDY
Address: 1007 LITTLE CREEK
City-St-Zip: ORLAND, FL 32825

Title: VP () Delete
Name: MICHAEL, JOHN
Address: 1048 LITTLE CREEK RD
City-St-Zip: ORLANDO, FL 32825

Title: P (X) Delete
Name: MORAR, VIRGIL
Address: 980 OLD BARN RD
City-St-Zip: ORLANDO, FL 32825

Title: T () Delete
Name: WILLIAMS, CHRIS
Address: 10330 WOODSTREAM COURT
City-St-Zip: ORLANDO, FL 32825

Title: D () Delete
Name: MORALES, LUIS
Address: 912 OLD BARN ROAD
City-St-Zip: ORLANDO, FL 32825

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:

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

Title: P (X) Change () Addition
Name: MORALES, LUIS
Address: 912 OLD BARN ROAD
City-St-Zip: ORLANDO, FL 32825

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: TASHA TORRES

LCAM

03/23/2009

Electronic Signature of Signing Officer or Director

Date