


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 8:00 am
Secretary of State

02-24-2006 90014 038 ****61.25

DOCUMENT # N41981

1. Entity Name
WINTER HILL HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
P.O. BOX 616104
ORLANDO, FL 32861-6104 US

Mailing Address
P.O. BOX 616104
ORLANDO, FL 32861-6104 US



2. Principal Place of Business
5401 S Kirkman RD

3. Mailing Address
5401 S Kirkman RD

Suite, Apt. #, etc.
STE 450

01052006 Chg-NP CR2E037 (11/05)

City & State
ORLANDO, FL

City & State
ORLANDO, FL

Zip
32819

Country
ORANGE

Zip
32819

Country
ORANGE

4. FEI Number
59-3050963

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent

WILINSKI, BONNIE
375 KILLINGTON WAY
ORLANDO, FL 32835

7. Name and Address of New Registered Agent

Name
Community Mgmt Professionals

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

5401 S Kirkman RD STE 450

City
ORLANDO

FL Zip Code
32819

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.

SIGNATURE *[Signature]* **2-20-06**

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE P	<input type="checkbox"/> Delete WILINSKI, BONNIE 375 KILLINGTON WAY ORLANDO, FL 32835
TITLE ETD	<input type="checkbox"/> Delete BLACK, CHARLES 8024 ADDISON CT ORLANDO, FL 32835
TITLE D	<input checked="" type="checkbox"/> Delete BOXX, TRACY 113 KILLINGTON WAY ORLANDO, FL 32835
TITLE D S	<input type="checkbox"/> Delete BURTON, RUTH 210 KILLINGTON CT ORLANDO, FL 32835
TITLE D VP	<input type="checkbox"/> Delete JONES, NATE 8019 ADDISON COURT ORLANDO, FL 32835
TITLE D	<input checked="" type="checkbox"/> Delete FRANKLIN, SCOTT 318 SNOWSHOE COURT ORLANDO, FL 32835

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Joy CLAUSIER 245 Killington Ct Orlando, FL 32835
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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: *[Signature]* **1/25/06** **407-679-0700**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #