2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 01, 2005 8:00 am
Secretary of State
08-01-2005 90028 020 ****61.25

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1. Entity Name
VILLAGE ON THE GREENS AT WINSTON TRAILS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5980 WINSTON TRAILS BLVD LAKE WORTH, FL 33463	5980 WINSTON TRAILS BLVD LAKE WORTH, FL 33463

07212005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
c/o CAMPBELL PROPERTY MGMT	c/o CAMPBELL PROPERTY MGMT
Suite, Apt. #, etc.: 3918 Via Poinciana Dr, Ste #9	Suite, Apt. #, etc.: 3918 Via Poinciana Dr, Ste #9
City & State: LAKE WORTH, FL	City & State: LAKE WORTH, FL
Zip: 33467 Country: PALM BCH	Zip: 33467 Country: PALM BCH.

4. FEI Number: 65-0025065 ☐ Applied For ☐ Not Applicable

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
CRAMB, BRUCE R CAMPBELL PROP. MGMT'T 5980 WINSTON TRAILS BLVD. LAKE WORTH, FL 33463	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 7, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REIFF, BURT 5980 WINSTON TRAILS BLVD LAKE WORTH, FL 33463	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	P, BRUCE FRYER 6180 Grand Cypress Cir. Lake Worth FL 33463	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DOUD, JOHN 6332 GRANES CYPRESS CIR. LAKE WORTH, FL 33463	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	V. P. JEREHY POLSTON 6328 GRAND CYPRESS CIR. LAKE WORTH, FL 33463	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KERMAN, PHILLIP 6399 GRAND CYPRESS CIR. LAKE WORTH, FL 33463	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	Treas. CECIL MULLENIX 6407 GRAND CYPRESS CIR. LAKE WORTH, FL 33463	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MULLENIX, CECIL 6407 GRAND CYPRESS CIR. LAKE WORTH, FL 33463	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	SECTY. DALE CAFFERTY 6455 CROOKED STICK COURT LAKE WORTH, FL 33463	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	DIR. DOMINGO SANTOS 6164 GRAND CYPRESS CIR. LAKE WORTH, FL 33463	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP		☐ Change ☐ Addition

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: Bruce R Fryer (561)433-9050 7/27/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

BRUCE R. FRYER