

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90040 030 ****61.25

DOCUMENT # N94000003116 1. Entity Name WINDSOR OAKS HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 101 PARK PLACE STE. 2 KISSIMMEE, FL 34741			Mailing Address 101 PARK PLACE STE. 2 KISSIMMEE, FL 34741		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		01112005 Chg-NP CR2E037 (10/03)	
4. FEI Number 59-2629453				☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ASSOC. MGMT. GRP OF CNTRL. FL., INC. 101 PARK PLACE BLVD SUITE 2 KISSIMMEE, FL 34741				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 <u><i>Leslie Ludlam</i></u> DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)	
Filing Fee is \$61.25 Due by May 1, 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	PD HERIBERTO, MARTE 1631 WINDSOR OAK CT KISSIMMEE, FL 34744	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Wilda Caamano 1644 Windsor Oak Ct. Kissimmee, FL 34744	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MORGANTI, JULISSA 1638 WINDSOR OAK COURT KISSIMMEE, FL 34744	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Charlie Konitski 1616 Windsor Oak Ct. Kissimmee, FL 34744	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CASANOVA, LOURDES 1627 WINDSOR OAK COURT KISSIMMEE, FL 34744	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Alvaro Solano 1639 Windsor Oak Ct. Kissimmee, FL 34744	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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: <u><i>Wilda Caamano</i></u> 2/2/05 407 400 6205 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					