2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001308

City-St-Zip:

SARASOTA, FL 34235

Entity Name: WYNDHAM HOMEOWNERS ASSOCIATION, INC.

FILED Apr 14, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3074 -17TH ST C/O CMR PROPERTY MANAGEMENT, INC. SARASOTA, FL 34234 40 SARASOTA CENTER BLVD. #108A LIS SARASOTA, FL 34240 **Current Mailing Address:** New Mailing Address: C/O CMR PROPERTY MANAGEMENT 3074 -17TH ST 40 SARASOTA CENTER BLVD #108A SARASOTA, FL 34234 US SARASOTA, FL 34240 US FEI Number: 65-0790516 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: DIANE ROYSE ENTERPRISES, INC. MELENDY, DONNIE P CAM 4840 SUNDAY CT 40 SARASOTA CENTER BLVD. SARASOTA, FL 34235 UNIT 108 A SARASOTA, FL 34240 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: DONNIE P. MELENDY 04/14/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BROZEK, BRUCE Name: Name: 2038 WASATCH DR Address: Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip: Title: VPD () Delete Title: () Change () Addition CLAUNCH, RON Name: Name: Address: 1941 WASATCH DR Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip: Title: () Delete Title: (X) Change () Addition SIGLIN, DAN Name: YEAGER, BILL Name: 2013 WASATCH DR Address: Address: 1987 WYNDHAM DR. City-St-Zip: SARASOTA, FL 34235 City-St-Zip: SARASOTA, FL 34235 Title: TD () Delete Title: () Change () Addition Name: SHAFER, MASON Name: 1940 WYNDHAM DR Address: Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip: Title: Title: () Delete () Change () Addition KEMP, ROBERT Name: Name: 2133 WASATCH DR Address: Address:

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.

City-St-Zip:

SIGNATURE: BRUCE BROZEK PD 04/14/2004