

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32137

FILED
Jan 09, 2009
Secretary of State

Entity Name: WINDSOR HILL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5401 S. KIRKMAN ROAD
SUITE 450
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

5401 S. KIRKMAN ROAD
SUITE 450
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 59-2948592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT PROFESSIONALS, INC.
5401 S. KIRKMAN ROAD
SUITE 450
ORLANDO, FL 32819 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: P () Delete
Name: KLUNGSETH, KAY
Address: 2717 WINDSOR HILL DR
City-St-Zip: WINDERMERE, FL 34786

Title: VP () Delete
Name: NABOVI, DAVID
Address: 9657 CASTLE WAY
City-St-Zip: WINDERMERE, FL 34786

Title: V () Delete
Name: MCNEIL, JIM
Address: 7642 CASTLE WAY DRIVE
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCNEIL, JIM
Address: 9642 CASTLE WAY
City-St-Zip: WINDERMERE, FL 34786

Title: VP (X) Change () Addition
Name: KLUNGSETH, KAY
Address: 2717 WINDSOR HILL DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: D (X) Change () Addition
Name: NABAVI, DAVID
Address: 9659 CASTLE WAY
City-St-Zip: WINDERMERE, FL 34786

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: JIM MCNEIL

P

01/09/2009

Electronic Signature of Signing Officer or Director

Date