2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000472

Entity Name: WINFIELD HOMEOWNERS ASSOCIATION, INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

882 JACKSON AVE 2755 BORDER LAKE ROAD

WINTER PARK, FL 32789 US SUITE 101

APOPKA, FL 32703 US

Current Mailing Address: New Mailing Address:

882 JACKSON AVE 2755 BORDER LAKE ROAD

WINTER PARK, FL 32789 US SUITE 101

APOPKA, FL 32703 US

FEI Number: 59-3325590 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:

JORDAN, BRETT M KANAGA, MERIDYTHE
882 JACKSON AVE 2755 BORDER LAKE ROAD
WINTER PARK FL 32789 LIS SLITE 101

WINTER PARK, FL 32789 US SUITE 101
APOPKA, FL 32703 US

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: MERIDYTHE KANAGA 04/27/2009

Electronic Signature of Registered Agent Date

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DP (X) Change () Addition

 Name:
 URRUTIA, BENJAMIN
 Name:
 BURLEY, SUSAN

 Address:
 2028 BOBTAIL DRIVE
 Address:
 8046 BIRMAN STREET

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:
 MAITLAND, FL 32751

Title: D () Delete Title: DVP (X) Change () Addition Name: CASTNER, JENNIFER Name: FORMAN, TIM

 Address:
 7961 BIRMAN ST.
 Address:
 8028 BIRMAN ST.

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:
 MAITLAND, FL 32751

Title: D () Delete Title: DST (X) Change () Addition Name: BURLEY, SUSAN Name: PARKER, WILLIAM

 Address:
 8046 BIRMAN ST.
 Address:
 2119 FENNELL

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:
 MAITLAND, FL 32751

Title: D (X) Delete Title: () Change () Addition

 Name:
 FORMAN, TIM
 Name:

 Address:
 8028 BIRMAN ST.
 Address:

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 JOHNSON, ROXANNE
 Name:

 Address:
 2013 FALKNER RD.
 Address:

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:

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: WILLIAM PARKER DST 04/27/2009