## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N96000003876

Entity Name: WIN-GATE VILLAGE CLUB ASSOCIATION, INC.

FILED Jan 02, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 10722 GATEWAY AVE ORLANDO, FL 32821 US **Current Mailing Address: New Mailing Address:** 10722 GATEWAY AVE ORLANDO, FL 32821 US FEI Number: 59-3399786 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: MANOES, JOSEPH 10722 GATEWAY AVE US ORLANDO, FL 32821 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BARON, JERRY Name: Name: 10844 WM. TELL DR. Address: Address: City-St-Zip: ORLANDO, FL 32821 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BUSH, LOUIS Name: Address: 5215 WILLIAMSPORT DRIVE Address: City-St-Zip: ORLANDO, FL 32821 City-St-Zip: Title: VPD () Delete Title: VPD (X) Change ( ) Addition ALBEE, DEBORAH Name: BROOKING, JANET Name: 5542 WESTBROOK DRIVE 10781 WHARTON COURT Address: Address: City-St-Zip: ORLANDO, FL 32821 City-St-Zip: ORLANDO, FL 32821 Title: SD ( ) Delete Title: () Change () Addition Name: HUFFMAN, CAROL Name: 10653 WM. TELL DR. Address: Address: City-St-Zip: ORLANDO, FL 32821 City-St-Zip: Title: (X) Delete Title: () Change () Addition BROOKING, JANET Name: Name: 10271 WHARTON COURT Address: Address: City-St-Zip: ORLANDO, FL 32821 City-St-Zip: Title: () Delete Title: () Change () Addition KELBERMAN, GERALD Name: Name: Address: 5548 WESTBROOK DRIVE 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: GERALD KELBERMAN PD 01/02/2003

ORLANDO, FL 32821

City-St-Zip: