

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 725454

**FILED**  
**Feb 16, 2017**  
**Secretary of State**  
**CC9159091592**

**Entity Name:** WINSTON PARK NORTHEAST 300/400 ASSOCIATION, INC.

**Current Principal Place of Business:**

FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DRIVE N SUITE 100  
ST. PETERSBURG, FL 33716

**Current Mailing Address:**

FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DRIVE N SUITE 100  
ST. PETERSBURG, FL 33716 US

**FEI Number:** 59-1535284

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LANG AND RAFFA, PA  
5001 4TH ST N STE A  
ST PETERSBURG, FL 33734 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name CAULFIELD, VINCENT  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DRIVE N SUITE 100  
City-State-Zip: ST. PETERSBURG FL 33716

Title VP  
Name DAVIS, LLOYD  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DRIVE N SUITE 100  
City-State-Zip: ST. PETERSBURG FL 33716

Title TREASURER  
Name HANEY, JOHN  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DRIVE N SUITE 100  
City-State-Zip: ST. PETERSBURG FL 33716

Title SECRETARY  
Name ODER, JOHN  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DRIVE N SUITE 100  
City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR  
Name PATSCOTT, JOHN  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DRIVE N SUITE 100  
City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR  
Name MCDONALD, ANN  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DRIVE N SUITE 100  
City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR  
Name MARTIN, GERALD  
Address FIRSTSERVICE RESIDENTIAL  
2870 SCHERER DRIVE N SUITE 100  
City-State-Zip: ST. PETERSBURG FL 33716

*I hereby 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 all other like empowered.*

**SIGNATURE:** VINCENT CAULFIELD

**PRESIDENT**

**02/16/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date