

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727259

Entity Name: WINDMILL POINTE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**800 TARPON WOODS BLVD.,F-4
PALM HARBOR, FL 34685**Current Mailing Address:**800 TARPON WOODS BLVD., F-4
PALM HARBOR, FL 34685 US**FEI Number:** 59-1762193**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ELITE PROPERTY MANAGEMENT SVCS. INC.
334 EAST LAKE RD.#244
PALM HARBOR, FL 34685 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:** DAVID W. ORMISTON

03/22/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name TUOHY, GREG
Address 334 EAST LAKE RD #244
City-State-Zip: PALM HARBOR FL 34685

Title PRESIDENT
Name HIGNEY, MICHAEL
Address 334 EAST LAKE RD #244
City-State-Zip: PALM HARBOR FL 34685

Title D
Name REMSEN, KATHLEEN
Address 334 EAST LAKE RD #244
City-State-Zip: PALM HARBOR FL 34685

Title V.P.
Name WRIGHT, MITCH
Address 334 EAST LAKE RD #244
City-State-Zip: PALM HARBOR FL 34685

Title TREASURER
Name CASSICK, SANDRA
Address 334 EAST LAKE RD #244
City-State-Zip: PALM HARBOR FL 34685

Title D
Name FORNWALT, ROBERT
Address 334 EAST LAKE RD #244
City-State-Zip: PALM HARBOR FL 34685

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: MICHAEL HIGNEY

PRESIDENT

03/22/2015

Electronic Signature of Signing Officer/Director Detail

Date