

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727259

Entity Name: WINDMILL POINTE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**2719 WESTBURY AVENUE
ATTN: WPHOA PRESIDENT
PALM HARBOR, FL 34685**Current Mailing Address:**P.O. BOX 364
OLDSMAR, FL 34677 US**FEI Number:** 59-1762193**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DAVID W. ORMISTON, CPA
800 TARPON WOODS BLVD
SUITE F-4
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

04/18/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|----------------------|
| Title | PRES |
| Name | TUOHY, GREG |
| Address | 2719 WESTBURY AVENUE |
| City-State-Zip: | PALM HARBOR FL 34685 |

| | |
|-----------------|----------------------|
| Title | V.P. |
| Name | WRIGHT, MITCH |
| Address | 2714 WILTSHIRE AVE. |
| City-State-Zip: | PALM HARBOR FL 34685 |

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|-----------------|--------------------------|
| Title | TRES |
| Name | HIGNEY, MICHAEL |
| Address | 1512 WINDMILL POINTE RD. |
| City-State-Zip: | PALM HARBOR FL 34685 |

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|-----------------|-----------------------|
| Title | DIR |
| Name | REMSEN, KATHLEEN |
| Address | 2828 WENDOVER TERRACE |
| City-State-Zip: | PALM HARBOR FL 34685 |

| | |
|-----------------|-----------------------|
| Title | DIR |
| Name | FORNWALT, ROBERT |
| Address | 2695 WOODHALL TERRACE |
| City-State-Zip: | PALM HARBOR FL 34685 |

| | |
|-----------------|----------------------|
| Title | DIR |
| Name | CASSICK, SANDRA |
| Address | 2520 WOODCOTE TER. |
| 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 G. HIGNEY**TREASURER**

04/18/2013

Electronic Signature of Signing Officer/Director Detail

Date