

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 741873

**Entity Name:** WINDMILL POINT I PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

490 SW KENTWOOD RD  
PT ST LUCIE, FL 34953

**Current Mailing Address:**

490 SW KENTWOOD RD  
PT ST LUCIE, FL 34953

**FEI Number:** 59-2012569

**Certificate of Status Desired:** No

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

KELLY, DEBRA  
490 SW KENTWOOD RD  
PT ST LUCIE, FL 34953 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 KELLY, DEBRA  
Address 391 SW TULIP BLVD  
City-State-Zip: PORT SAINT LUCIE FL 34953

Title SD  
Name SAFFIOTI, LISA  
Address 213 SW CHERRY HILL RD.  
City-State-Zip: PORT SAINT LUCIE FL 34953

Title VD  
Name SOLES, GREGORY  
Address 2901 SW MASSEY LANE  
City-State-Zip: PORT SAINT LUCIE FL 34953

Title TD  
Name JENKINS, ANN  
Address 202 SW KENTWOOD RD.  
City-State-Zip: PORT SAINT LUCIE FL 34953

*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:** DEBRA KELLY

**PRESIDENT**

**01/21/2015**

Electronic Signature of Signing Officer/Director Detail

Date