

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742461

**Entity Name:** WINDSOR L CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

253 WINDSOR L  
WEST PALM BEACH, FL 33417

**Current Mailing Address:**

WINDSOR L C/O SEACREST SERVICES, INC.  
2101 CENTREPARK W DR SUITE #110  
WEST PALM BEACH, FL 33409 US

**FEI Number:** 59-1869957

**Certificate of Status Desired:** No

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

LATULIPPE, HARRIET  
253 WINDSOR L  
WEST PALM BEACH, FL 33417 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:** HARRIET LATULIPPE

02/10/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name MELE, EMILY  
Address 2553 RT 44-55  
City-State-Zip: GARDINER NY 12525

Title TREASURER  
Name SHERMAN, ROCHELLE  
Address 273 WINDSOR L  
City-State-Zip: WEST PALM BEACH FL 33417

Title VP  
Name OLFF, ANTON  
Address 261 WINDSOR L  
City-State-Zip: WEST PALM BEACH FL 33417

Title DIRECTOR  
Name CAMMY, JERRY  
Address 45 MIDLAND CRESCENT  
City-State-Zip: OTTAWA ONTARIO K2H 8N2

Title SECRETARY  
Name HEIZLER, FRANCES  
Address 264 WINDSOR L  
City-State-Zip: WEST PALM BEACH FL 33417

Title PRESIDENT  
Name LATULIPPE, HARRIET  
Address 253 WINDSOR L  
City-State-Zip: WEST PALM BEACH FL

*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:** HARRIETT LATULIPPE (SK)

PRESIDENT

02/10/2021

Electronic Signature of Signing Officer/Director Detail

Date