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.			
	Electronic Signature of Registered Agent		L
Officer/Director Detail :			
Title	DIRECTOR, PRESIDENT	Title	DIRECTOR, VP
Name	MCCARTHY, MICHAEL	Name	PYBURN, LINDA
Address	4227 NORTHLAKE BOULEVARD	Address	4227 NORTHLAKE BOULEVARD
City-State-Zip:	PALM BEACH GARDENS FL 33410	City-State-Zip:	PALM BEACH GARDENS FL 33410
Title	DIRECTOR, SECRETARY	Title	DIRECTOR
Name	LEON, DENNIS	Name	CATRON, BILL
Address	4227 NORTHLAKE BOULEVARD	Address	4227 NORTHLAKE BOULEVARD
City-State-Zip:	PALM BEACH GARDENS FL 33410	City-State-Zip:	PALM BEACH GARDENS FL 33410
Title	TREASURER, DIRECTOR		

4227 NORTHLAKE BOULEVARD PALM BEACH GARDENS. FL 33410

Current Principal Place of Business:

Current Mailing Address:

4227 NORTHLAKE BOULEVARD PALM BEACH GARDENS. FL 33410 US

FEI Number: 59-2053343

Name

Address

Name and Address of Current Registered Agent:

SEA BREEZE CMS, INC 4227 NORTHLAKE BOULEVARD PALM BEACH GARDENS, FL 33410 US

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 MCCARTHY

BELL. SHARON

City-State-Zip: PALM BEACH GARDENS FL 33410

4227 NORTHLAKE BOULEVARD

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/10/2017

Date

FILED Apr 10, 2017 Secretary of State CC2267220097

Date

Certificate of Status Desired: No

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: WINCHESTER COURTS HOMEOWNERS ASSOCIATION, INC.

DOCUMENT# 747991