

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000000888

**Entity Name:** WINGSPREAD OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**2501 WEST MAIN STREET #110  
LEESBURG, FL 34748**Current Mailing Address:**2501 WEST MAIN STREET #110  
LEESBURG, FL 34748 US**FEI Number: 75-3076773****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARBIEUX, ELIZABETH  
2501 WEST MAIN STREET  
#110  
LEESBURG, FL 34748 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	DIRECTOR, VP
Name	DELGADO, DANIEL
Address	2501 WEST MAIN STREET #110
City-State-Zip:	LEESBURG FL 34748

Title	DIRECTOR, SECRETARY
Name	GRUNEWALD, SHAYNA
Address	2501 WEST MAIN STREET #110
City-State-Zip:	LEESBURG FL 34748

Title	DIRECTOR, PRESIDENT
Name	CICHIELO, JIM
Address	2501 WEST MAIN STREET #110
City-State-Zip:	LEESBURG FL 34748

Title	DIRECTOR, TREASURER
Name	DIPIETRO, FRANK
Address	2501 WEST MAIN STREET #110
City-State-Zip:	LEESBURG FL 34748

Title	DIRECTOR
Name	MURDOCK, MEREDITH
Address	2501 WEST MAIN STREET #110
City-State-Zip:	LEESBURG FL 34748

*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: JIM CICHIELO****PRESIDENT****01/18/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date