

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010962

Entity Name: THE ENCLAVE AT WINDSOR HILLS HOMEOWNERS ASSOCIATION, INC.**FILED**
Mar 03, 2016
Secretary of State
CC5671515509**Current Principal Place of Business:**8390 CHAMPIONSGATE BLVD - STE. 304
CHAMPIONS GATE, FL 33896**Current Mailing Address:**8390 CHAMPIONSGATE BLVD - STE. 304
CHAMPIONS GATE, FL 33896**FEI Number: 32-0116470****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**AEGIS COMMUNITY MANAGEMENT SOLUTIONS, INC.
8390 CHAMPIONSGATE BLVD - STE. 304
CHAMPIONS GATE, FL 33896 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	PRESIDENT
Name	VAZZANA, JAMES
Address	8390 CHAMPIONSGATE BLVD - STE. 304
City-State-Zip:	CHAMPIONS GATE FL 33896

Title	VP
Name	SIERRA, RENE
Address	8390 CHAMPIONSGATE BLVD - STE. 304
City-State-Zip:	CHAMPIONS GATE FL 33896

Title	SECRETARY
Name	QUINN, DEANNA
Address	8390 CHAMPIONSGATE BLVD - STE. 304
City-State-Zip:	CHAMPIONS GATE FL 33896

Title	TREASURER
Name	NICOLSON, SUSAN
Address	8390 CHAMPIONSGATE BLVD - STE. 304
City-State-Zip:	CHAMPIONS GATE FL 33896

Title	DIRECTOR
Name	LEGGETT, CHRIS
Address	8390 CHAMPIONSGATE BLVD - STE. 304
City-State-Zip:	CHAMPIONS GATE FL 33896

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: JAMES VAZZANA**PRESIDENT****03/03/2016**

Electronic Signature of Signing Officer/Director Detail

Date