

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04505

**FILED
Mar 10, 2022
Secretary of State
2141092670CC**

Entity Name: WINDERMERE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6620 LAKE WORTH RD.
SUITE F
LAKE WORTH, FL 33467

Current Mailing Address:

C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
LAKE WORTH, FL 33467 US

FEI Number: 59-2506456

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STOLOFF & MANOFF, P.A.
1818 S. AUSTRALIAN AVE.
SUITE 400
WEST PALM BEACH, FL 33409 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: STOLOFF

03/10/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ROSEN, JOSEPH
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name LANGINO, LEONARD
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title VP
Name CYR, DENISE
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name GALLO, CAROLYN
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title PRESIDENT
Name DRUMMOND, CARILYNN
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title TREASURER
Name HANSON, MARCIA
Address C/O DAVENPORT PROPERTY MGMT.
6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name WOODHOUSE, LATIFA
Address 6620 LAKE WORTH RD.
SUITE F
City-State-Zip: LAKE WORTH FL 33467

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: CARILYNN DRUMMOND

PRESIDENT

03/10/2022

Electronic Signature of Signing Officer/Director Detail

Date