2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04505

Entity Name: WINDERMERE HOMEOWNERS ASSOCIATION, INC.

FILED Feb 27, 2023 Secretary of State 1560319771CC

02/27/2023

Current Principal Place of Business:

2101 CENTREPARK W. DRIVE

SUITE 110

WEST PALM BEACH, FL 33409

Current Mailing Address:

C/O SEACREST SERVICES, INC. 2101 CENTREPARK W. DRIVE SUITE 110 WEST PALM BEACH, FL 33409 US

FEI Number: 59-2506456 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIELDS & BACHOVE, PLLC 4440 PGA BOULEVARD SUITE 308

PALM BEACH GARDENS, FL 33410 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: EVAN R. BACHOVE, ESQUIRE

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

Name ROSEN, JOSEPH Name LANGINO, LEONARD

Address C/O SEACREST SERVICES, INC. Address C/O SEACREST SERVICES, INC.

2101 CENTREPARK W. DRIVE SUITE 2101 CENTREPARK W. DRIVE SUITE

City-State-Zip: WEST PALM BEACH FL 33409 City-State-Zip: WEST PALM BEACH FL 33409

Title VP Title DIRECTOR

Name CYR, DENISE Name GALLO, CAROLYN

Address C/O SEACREST SERVICES, INC. Address C/O SEACREST SERVICES, INC.

2101 CENTREPARK W. DRIVE SUITE 2101 CENTREPARK W. DRIVE SUITE

City-State-Zip: WEST PALM BEACH FL 33409 City-State-Zip: WEST PALM BEACH FL 33409

Title PRESIDENT Title TREASURER

Name DRUMMOND, CARILYNN Name HANSON, MARCIA

Address C/O SEACREST SERVICES, INC. Address C/O SEACREST SERVICES, INC.

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City-State-Zip: WEST PALM BEACH FL 33409 City-State-Zip: WEST PALM BEACH FL 33409

Title SECRETARY

Address

Name WOODHOUSE, LATIFA

Name Woodhlood, LATII A

C/O SEACREST SERVICES, INC. 2101 CENTREPARK W. DRIVE SUITE

110

City-State-Zip: WEST PALM BEACH FL 33409

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 BECKFORD DRUMMOND PRESIDENT 02/27/2023