

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000007603

**Entity Name:** WYNDHAM LAKES ESTATES HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 23, 2014**  
**Secretary of State**  
**CC0362015497**

**Current Principal Place of Business:**

811 MABBETTE STREET  
KISSIMMEE, FL 34741

**Current Mailing Address:**

811 MABBETTE STREET  
KISSIMMEE, FL 34741 US

**FEI Number: 20-4873418**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CT CORP. SYSTEM ATTN:MADONNA CUDDIHY  
1200 S. PINE ISLAND ROAD  
#250  
PLANTATION, FL 33324 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            DE LA OSSA, CARLOS  
Address        4600 WEST CYPRESS STREET  
                 SUITE 200  
City-State-Zip: TAMPA FL 33607

Title            VP  
Name            ADELMAN, JEFFREY  
Address        4600 WEST CYPRESS STREET  
                 SUITE 200  
City-State-Zip: TAMPA FL 33607

Title            SECRETARY, TREASURER  
Name            MORGAN, KAREN  
Address        4600 WEST CYPRESS STREET  
                 SUITE 200  
City-State-Zip: TAMPA FL 33607

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: CARLOS DE LA OSSA**

**PRESIDENT**

**04/23/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date