

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000010457

**Entity Name:** SOUTHWIND HOME OWNERS ASSOCIATION OF SOUTH  
LAKELAND INC.**FILED**  
**Jan 27, 2017**  
**Secretary of State**  
**CC0079763681****Current Principal Place of Business:**ANTHONY M. BONACUM  
4935 SOUTHWIND DR.  
MULBERRY, FL 33860**Current Mailing Address:**4905 SOUTHWIND DRIVE  
MULBERRY, FL 33860 US**FEI Number: 51-0559398****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BONACUM, ANTHONY M  
4935 SOUTHWIND DR.  
MULBERRY, FL 33860 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: ANTHONY M. BONACUM****01/27/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**Title PRESIDENT  
Name SIFFORD, TEE  
Address 4905 SOUTHWIND DRIVE  
City-State-Zip: MULBERRY FL 33860Title VP  
Name SKLADANEK, PETER  
Address 4905 SOUTHWIND DRIVE  
City-State-Zip: MULBERRY FL 33860Title TREASURER  
Name ARTER, VALERIE  
Address 4905 SOUTHWIND DRIVE  
City-State-Zip: MULBERRY FL 33860Title SECRETARY  
Name ZELLER, DAVID  
Address 4905 SOUTHWIND DR  
City-State-Zip: MULBERRY FL 33860Title DIRECTOR  
Name BATES, RICHARD  
Address 4905 SOUTHWIND DRIVE  
City-State-Zip: MULBERRY FL 33860Title DIRECTOR  
Name OWENS, LARRY  
Address 4905 SOUTHWIND DRIVE  
City-State-Zip: MULBERRY FL 33860Title DIRECTOR  
Name ZELLER, DAVID  
Address 4905 SOUTHWIND DRIVE  
City-State-Zip: MULBERRY FL 33860Title DIRECTOR  
Name BONACUM, TONY  
Address 4905 SOUTHWIND DRIVE  
City-State-Zip: MULBERRY FL 33860**Continues on page 2**

*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: DAVID ZELLER****SECRETARY****01/27/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name JONES, MARTIN  
Address 4905 SOUTHWIND DRIVE  
City-State-Zip: MULBERRY FL 33860

Title DIRECTOR  
Name HALL, JOHN  
Address 4905 SOUTHWIND DRIVE  
City-State-Zip: MULBERRY FL 33860

Title DIRECTOR  
Name TREMBLEY, DOTTIE  
Address 4905 SOUTHWIND DR.  
City-State-Zip: MULBERRY FL 33860