

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40073

Entity Name: WINDING CREEK OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**6511 PINE CASTLE AVENUE
ORLANDO, FL 32809**Current Mailing Address:**P O BOX 568846
ORLANDO, FL 32856 US**FEI Number:** 59-3111368**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLACKBIRD LAW, P.A.
390 N. ORANGE AVENUE
SUITE 2300
ORLANDO, FL 32801 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	VP
Name	CONWAY, MERLE
Address	976 LITTLE CREEK ROAD
City-State-Zip:	ORLANDO FL 32825

Title	PRESIDENT
Name	KOFFINAS, SANDY
Address	995 LITTLE CREEK ROAD
City-State-Zip:	ORLANDO FL 32825

Title	SECRETARY/TREASURER
Name	BUB, KEVIN
Address	1025 LITTLE CREEK ROAD
City-State-Zip:	ORLANDO FL 32825

Title	DIRECTOR
Name	PINTER, RENE
Address	915 RIVER WIND AVENUE
City-State-Zip:	ORLANDO FL 32825

Title	DIRECTOR
Name	BAKER, JENNIFER
Address	977 LITTLE CREEK ROAD
City-State-Zip:	ORLANDO FL 32825

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: SANDY KOFFINAS

PRESIDENT

05/11/2020

Electronic Signature of Signing Officer/Director Detail_____
Date