

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43902

Entity Name: WINDSOR HILL OF PORT ORANGE HOMEOWNERS' ASSOCIATION, INC.**FILED**
Mar 26, 2020
Secretary of State
4348810556CC**Current Principal Place of Business:**1648 TAYLOR RD
PMB 365
PORT ORANGE, FL 32128**Current Mailing Address:**1648 TAYLOR RD
PMB 365
PORT ORANGE, FL 32128 US**FEI Number: 59-3114823****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BARR, TERRI
1648 TAYLOR RD
PMB 365
PORT ORANGE, FL 32128 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: TERRI BARR****03/26/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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|-----------------|----------------------|
| Title | PRESIDENT |
| Name | BARR, TERRI |
| Address | 1373 HYDE PARK DR. |
| City-State-Zip: | PORT ORANGE FL 32128 |

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| Title | TREASURER |
| Name | MCCAIN, FLORENTINA |
| Address | 1315 N. WEMBLEY CIR |
| City-State-Zip: | PORT ORANGE FL 32128 |

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|-----------------|----------------------|
| Title | SECRETARY |
| Name | SUMNER, JEFFREY |
| Address | 1385 HYDE PARK DR. |
| City-State-Zip: | PORT ORANGE FL 32128 |

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|-----------------|----------------------|
| Title | DIRECTOR |
| Name | GARNER, CAROL |
| Address | 1381 HYDE PARK DR. |
| City-State-Zip: | PORT ORANGE FL 32128 |

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|-----------------|----------------------|
| Title | VP |
| Name | WRIGHT, TERESA |
| Address | 1359 S. WEMBLEY CIR |
| City-State-Zip: | PORT ORANGE FL 32128 |

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|-----------------|----------------------|
| Title | DIRECTOR |
| Name | FREDERICK, JAMES |
| Address | 1375 HYDE PARK DR. |
| City-State-Zip: | PORT ORANGE FL 32128 |

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| Title | DIRECTOR |
| Name | THURLOW, DAVID |
| Address | 1377 HYDE PARK DR. |
| City-State-Zip: | PORT ORANGE FL 32128 |

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: FLORENTINA MCCAIN**TREASURER****03/26/2020**

Electronic Signature of Signing Officer/Director Detail

Date