

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45020

Entity Name: WYNDTREE PHASE IV ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434 STE 5000
LONGWOOD, FL 32779

Current Mailing Address:

2180 WEST SR 434 STE 5000
LONGWOOD, FL 32779 US

FEI Number: 59-3125907

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SENTRY MANAGEMENT INC
2180 WEST SR 434 STE 5000
LONGWOOD, FL 32779 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: BRADLEY POMP

05/13/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name FLYNN, GAIL
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title TREASURER, DIRECTOR
Name LOGAN, WAYNE
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name DOLLAR, RENEE
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title VP, DIRECTOR
Name CANTI, CHRIS
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title SECRETARY, DIRECTOR
Name PAGANO, JIM
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name MCCALL, RICHARD
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name DEW, DWIGHT
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

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: GAIL FLYNN

PRESIDENT

05/13/2024

Electronic Signature of Signing Officer/Director Detail

Date