2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400002108

Entity Name: WYNDTREE PHASE III - VILLAGES 5 & 7 ASSOCIATION, INC.

FILED Jan 19, 2022 **Secretary of State** 2312396458CC

Current Principal Place of Business:

1044 DALESIDE LANE TRINITY, FL 34655

Current Mailing Address:

1324 SEVEN SPRINGS BLVD

#142

NEW PORT RICHEY. FL 34655 US

FEI Number: 65-0513297 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

CARLSON, ROBERT EUGENE 1044 DALESIDE LANE TRINITY, FL 34655 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: ROBERT EUGENE CARLSON 01/19/2022

Electronic Signature of Registered Agent

Officer/Director Detail:

#142

DP Title Title D, VP

Name NAGEL, GARY Name COOK, SUE

Address 1324 SEVEN SPRINGS BLVD Address 1324 SEVEN SPRINGS BLVD

#142

TRINITY FL 34655 City-State-Zip: City-State-Zip: NEW PORT RICHEY FL 34655

DT Title Title DIRECTOR

WITTKE, PAUL Name Name FOX. HARRISON

Address 1324 SEVEN SPRINGS BLVD #142 Address 1324 SEVEN SPRINGS BLVD #142

City-State-Zip: NEW PORT RICHEY FL 34655 NEW PORT RICHEY FL 34655 City-State-Zip:

Title **DIRECTOR** Title S

Name CREEGAN, HARRIETT Name DIGENNARO, ROSE

Address 1324 SEVEN SPRINGS BLVD 1324 SEVEN SPRINGS BLVD Address #142 #142

City-State-Zip: NEW PORT RICHEY FL 34655 City-State-Zip: TRINITY FL 34655

Title DIRECTOR

Name JELENIEWSKI, MARY

1324 SEVEN SPRINGS BLVD Address

#142

City-State-Zip: NEW PORT RICHEY FL 34655

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.

01/19/2022 SIGNATURE: GARY NAGEL **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Date