104 W. 6TH AV WINDEREMER				
Current Mai	ling Address:			
104 W. 6TH WINDEREM	AVENUE ERE, FL 34786			
FEI Number: 20-0579784		Certificate of Status Desired: Yes		
Name and A	Address of Current Registered Agent:			
ROBINSON, RE 606 SHOREWO	EGINA MORROW DOD DR			
UNIT 408 CAPE CANAVE	ERAL, FL 32920 US			
CAPE CANAVE	RAL, FL 32920 US	stered office or regis	tered agent, or both, in the State of Flor	ida.
CAPE CANAVE		stered office or regis	tered agent, or both, in the State of Flor	^{ida.} 02/15/2016
CAPE CANAVE	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of Flor	
CAPE CANAVE	d entity submits this statement for the purpose of changing its regises E: REGINA MORROW ROBINSON Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Flor	02/15/2016
CAPE CANAVE	d entity submits this statement for the purpose of changing its regises E: REGINA MORROW ROBINSON Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Flor	02/15/2016
CAPE CANAVE The above name SIGNATURE	d entity submits this statement for the purpose of changing its regises: REGINA MORROW ROBINSON Electronic Signature of Registered Agent ctor Detail :			02/15/2016 Date
CAPE CANAVE The above name SIGNATURE Officer/Dire Title	d entity submits this statement for the purpose of changing its regis E: REGINA MORROW ROBINSON Electronic Signature of Registered Agent ctor Detail : D	Title	OFFICER	02/15/2016 Date
CAPE CANAVE The above name SIGNATURE Officer/Dire Title Name Address	d entity submits this statement for the purpose of changing its registered REGINA MORROW ROBINSON Electronic Signature of Registered Agent Ctor Detail : D ROBINSON, REGINA MORROW 606 SHOREWOOD DR	Title Name Address	OFFICER ROBINSON, GREGORY MICHAI 606 SHOREWOOD DR	02/15/2016 Date

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REGINA MORROW ROBINSON

DIRECTOR

02/15/2016

Electronic Signature of Signing Officer/Director Detail

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: WINDERMERE COUNSELING CORP.

Current Principal Place of Business:

(

FILED Feb 15, 2016 **Secretary of State** CC2104291183

Date