

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2005 8:00 am
Secretary of State

07-14-2005 90078 038 ****61.25

DOCUMENT # 715573 1. Entity Name WINDSOR PARK CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 120 WETTAW LANE NORTH PALM BEACH, FL 33408			Mailing Address 120 WETTAW LANE NORTH PALM BEACH, FL 33408		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		07102005 Chg-NP CR2E037 (10/03)	
4. FEI Number 59-1743270				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WINDSOR PARK CONDO, SOUSA IRENE 120 WETTAW LANE NORTH PALM BEACH, FL 33408			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Irene M. Sousa, Treasurer</i></u> Signature, typed or printed name of registered agent and title, date and c. (NOTE: Registered Agent's signature required when re-registering)					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY ST ZIP	T SOUSA, IRENE 121 WETTAW LANE, #117 NO. PALM BEACH, FL	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	2VP BATCHLOR, CHARLES 120 WETTAW LANE #217 NORTH PALM BEACH, FL 33408	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	VD LANE, ROBERT 110 WETTAW LANE #106 NORTH PALM BEACH, FL 33408	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	PD WIEGARD, JOYCE 1817 JUNE ISLE BLVD. NORTH PALM BEACH, FL 33408	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	S LANE, SUE 110 WETTAW LANE #106 NORTH PALM BEACH, FL 33408	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Irene M. Sousa, Treasurer</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR IRENE SOUSA			Date: <u>7-11-05</u> <u>1-561-844-6380</u> <u>1-978-687-0835</u>		