


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 91055 022 \*\*\*\*61.25

**DOCUMENT # 720151**

1. Entity Name  
**WINDERMERE CONDOMINIUM, INC.**



Principal Place of Business  
**1818 NW 54TH TERR  
 LAUDERHILL, FL 33313**

Mailing Address  
**P.O. BOX 290322  
 FT. LAUDERDALE, FL 33329 US**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
**DNS Property Management**  
**4350 SW 59 AVE**

04302004 Chg-NP CR2E037 (10/03)

City & State  
**DAVIE FL**

4. FEI Number  
**59-1361390**

Applied For  
 Not Applicable

Zip Country  
**33314 USA**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent.  
**POLIAKOFF, GARY A  
 C/O BECKER & POLIAKOFF, P.A.  
 3111 STIRLING ROAD  
 FT. LAUDERDALE, FL 33312**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
 Due by May 1, 2004**

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**

TITLE	PTD	<input type="checkbox"/> Delete
NAME	MCLEAN, KELLY B	
STREET ADDRESS	2001 N.W. 84TH TERRACE	
CITY - ST - ZIP	HOLLYWOOD, FL 33024	
TITLE	D	<input type="checkbox"/> Delete
NAME	GIBBS, GEORGE	
STREET ADDRESS	1848 55TH AVE, SUITE 1	
CITY - ST - ZIP	LAUDERHILL, FL 33313	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	JACKSON, CHERYL	
STREET ADDRESS	5400 NW 18TH ST	
CITY - ST - ZIP	LAUDERHILL, FL 33313	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MCGRAW, J.LLOYD	
STREET ADDRESS	1848 NW 54 TERR #3	
CITY - ST - ZIP	FORT LAUDERDALE, FL 33313	
TITLE	D	<input type="checkbox"/> Delete
NAME	STEPHENS, J. L	
STREET ADDRESS	1817 NW 54 TERR #4	
CITY - ST - ZIP	FORT LAUDERDALE, FL 33313	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

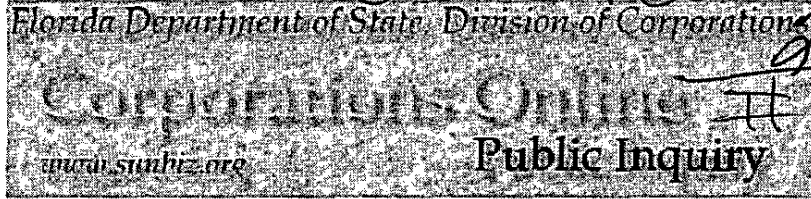
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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-an-powered.

**SIGNATURE:** \_\_\_\_\_ **4/30/04** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

Division of Corp  
Po Box 1500  
Tallahassee  
32302-



210659101  
700151

Florida Non Profit

WINDERMERE CONDOMINIUM, INC.

PRINCIPAL ADDRESS

1818 NW 54TH TERR  
LAUDERHILL FL 33313  
Changed 07/29/1985

MAILING ADDRESS

P.O. BOX 290322  
FT. LAUDERDALE FL 33329 US  
Changed 10/13/1997

Document Number  
720151

FEI Number  
591361390

Date Filed  
01/29/1971

State  
FL

Status  
ACTIVE

Effective Date  
NONE

Last Event  
REINSTATEMENT

Event Date Filed  
08/28/1995

Event Effective Date  
NONE

Registered Agent

Name & Address
POLIAKOFF, GARY A C/O BECKER & POLIAKOFF, P.A. 3111 STIRLING ROAD FT. LAUDERDALE FL 33312
Name Changed: 10/13/1997
Address Changed: 10/13/1997

Officer/Director Detail

Name & Address	Title
MCLEAN, KELLY B 2001 N.W. 84TH TERRACE HOLLYWOOD FL 33024	PTD
GIBBS, GEORGE	