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Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **722422** **(3)**

1. Corporation Name

WINDMILL VILLAGE CIVIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4000 NORTH TUTTLE AVE. SARASOTA FL 34234	4000 NORTH TUTTLE AVE. SARASOTA FL 34234

3. Date Incorporated or Qualified: 01/11/1972

4. FEI Number: 59-1911034 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PIPHER, ELIZABETH
3906 VOORNE STREET
SARASOTA FL 34234

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	DEAN, DAVID		1.2 NAME		
STREET ADDRESS	4020 RHINE ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HAMPSHIRE, JOHN		2.2 NAME		
STREET ADDRESS	3623 COPENHAGEN ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP		
TITLE	TD	☒ DELETE	3.1 TITLE	TD	☒ Change ☐ Addition
NAME	SUPLEE, MARY		3.2 NAME	BUTINO, ROSE MARIE	
STREET ADDRESS	3728 COPENHAGEM ST		3.3 STREET ADDRESS	4663 PITTENGER ST.	
CITY-ST-ZIP	SARASOTA FL		3.4 CITY-ST-ZIP	SARASOTA, FL. 34234	
TITLE	SD	☒ DELETE	4.1 TITLE	SD	☒ Change ☐ Addition
NAME	SLATTERY, IRENE		4.2 NAME	ROBERTS, MARY JANE	
STREET ADDRESS	3912 COPENHAGEN ST		4.3 STREET ADDRESS	3822 RHINE ST.	
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-ST-ZIP	SARASOTA, FL. 34234	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	FALCONER, TOM		5.2 NAME		
STREET ADDRESS	3705 EDAM ST		5.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		5.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	EVANS, RICHARD		6.2 NAME	FRANK HOEY	
STREET ADDRESS	4412 P HENGER		6.3 STREET ADDRESS	3918 VOORNE ST.	
CITY-ST-ZIP	SARASOTA FL		6.4 CITY-ST-ZIP	SARASOTA FL. 34234	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rose Marie Butino 2/5/98 941-359-1289

CR2E037 (10/97)