

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 726210

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** WINDEMERE, INC.

**Current Principal Place of Business:**

2650 GULF SHORE BLVD., NORTH  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

2650 GULF SHORE BLVD., NORTH  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 59-1542395

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHAPER, LEN W P  
2650 GULF SHORE BLVD N.  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DT  
Name: CROSETTO, CARL  
Address: 2650 GULF SHORE BLVD. N.  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: KAYE, BYRNE  
Address: 2650 GULF SHORE BLVD. N.  
City-St-Zip: NAPLES, FL 34103

Title: SD  
Name: CARLSEN, CORKY  
Address: 2650 GULF SHORE BLVD N  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: GROSSI, RUBEN  
Address: 2650 GULF SHORE BLVD N  
City-St-Zip: NAPLES, FL 34103

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.

SIGNATURE: LEN SCHAPER

PRES

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date