

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727273

FILED
Jan 22, 2009
Secretary of State

Entity Name: WINSTON PARK ASSOCIATION, INC.

Current Principal Place of Business:

C/O MIAMI MANAGEMENT
14275 SW 142 AVE
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

C/O MIAMI MANAGEMENT
14275 SW 142 AVE.
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 59-1552261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEGFRIED, STEVEN
201 ALHAMBRA CIR.
#1102
MIAMI, FL 33134 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: D () Delete
Name: DORN, JEFFREY
Address: 7441 SW 129 AVE
City-St-Zip: MIAMI, FL 33183

Title: FVPD () Delete
Name: THOMPSON, GEORGE
Address: 13450 SW 82ND ST
City-St-Zip: MIAMI, FL 33183

Title: PD () Delete
Name: MOSS, MILES,
Address: 12900 SW 84 ST
City-St-Zip: MIAMI, FL 00000,

Title: SD () Delete
Name: MAER, SHERRY R
Address: 7424 SW 128TH CT
City-St-Zip: MAIMI, FL 33183

Title: SVPD () Delete
Name: COHEN, SCOTT T
Address: 13611 SW 78TH ST
City-St-Zip: MIAMI, FL 00000, 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MILES MOSS

PD

01/22/2009

Electronic Signature of Signing Officer or Director

Date