

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90007 027 ****61.25

DOCUMENT # 728570

1. Entity Name
WINDEMERE HOUSE ASSOCIATION, INC.



Principal Place of Business
250 SOUTH OCEAN BOULEVARD
DELRAY BEACH, FL 33483-6752

Mailing Address
60 VENETIAN DRIVE
DELRAY BEACH, FL 33483

40066000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

2710 Florida Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02172007 Chg-NP CR2E037 (12/06)

City & State

City & State
Delray Beach FL

4. FEI Number
59-1860355

Applied For
Not Applicable

Zip

Country

Zip
33483

Country
US

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

6. Name and Address of Current Registered Agent

SERGIO'S PROPERTY MANAGEMENT, INC.
60 VENETIAN DRIVE
DELRAY BEACH, FL 33483

7. Name and Address of New Registered Agent

Name Steven Wexel
Street Address (P.O. Box Number is Not Acceptable)
2710 Florida Blvd
City Delray Beach FL Zip Code 33483

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

Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/17/07
DATE

Filing Fee is \$61.25
Due by May 1, 2007

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 PD
NAME PAGANS, GERRY
STREET ADDRESS 250 S OCEAN BLVD UNIT 267
CITY-ST-ZIP DELRAY BEACH, FL 33483 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD
NAME MARTINEZ, VICENTE
STREET ADDRESS 250 S OCEAN BLVD UNIT 274
CITY-ST-ZIP DELRAY BEACH, FL 33483 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T, D
NAME GARDELLA, DEAN
STREET ADDRESS 250 S OCEAN BLVD UNIT 258
CITY-ST-ZIP DELRAY BEACH, FL 33483 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE D, S
NAME Dorothy Patterson
STREET ADDRESS 250 S. Ocean Blvd # 264
CITY-ST-ZIP Delray Beach FL ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 exemptions contained 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 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #