

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735667

FILED
Apr 03, 2009
Secretary of State

Entity Name: THE WINSOR MANOR CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

144 SHERIDAN AVE
LONGWOOD, FL 32750 US

New Principal Place of Business:

149 SHERIDAN AVE
LONGWOOD, FL 32750 US

Current Mailing Address:

144 SHERIDAN AVE
LONGWOOD, FL 32750 US

New Mailing Address:

149 SHERIDAN AVE
LONGWOOD, FL 32750 US

FEI Number: 59-2926268

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMPSON, GINA
144 SHERIDAN AVE
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

LOVERING, RICHARD S JR
149 SHERIDAN AVE
LONGWOOD, FL 32750 US

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: RICHARD S. LOVERING JR.

04/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAMILTON, BONNIE
Address: 136 SHERIDAN AVE
City-St-Zip: LONGWOOD, FL 32750

Title: T () Delete
Name: SAMPSON, GINA
Address: 144 SHERIDAN AVE
City-St-Zip: LONGWOOD, FL 32750

Title: SD () Delete
Name: HADDAWAY, KATHLEEN
Address: 112 SHERIDAN AVE
City-St-Zip: LONGWOOD, FL 32750

Title: V () Delete
Name: DORRIS, KATHY
Address: 162 SHERIDAN AVE
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: FARMER, THOMAS
Address: 137 SHERIDAN CT
City-St-Zip: LONGWOOD, FL 32750

Title: T (X) Change () Addition
Name: FEAZELL, JESSICA
Address: 141 SHERIDAN WAY
City-St-Zip: LONGWOOD, FL 32750

Title: SD (X) Change () Addition
Name: FERRIS, RICHARD
Address: 128 DELLWOOD DRIVE
City-St-Zip: LONGWOOD, FL 32750

Title: PD (X) Change () Addition
Name: LOVERING, RICHARD S JR
Address: 149 SHERIDAN AVE
City-St-Zip: LONGWOOD, FL 32750 US

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: RICHARD S LOVERING JR

PD

04/03/2009

Electronic Signature of Signing Officer or Director

Date