

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2007 8:00 am
Secretary of State

01-31-2007 90041 041 ****61.25

DOCUMENT # 742461 1. Entity Name WINDSOR L CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 272 WINDSOR L WEST PALM BEACH, FL 33417 US			Mailing Address 255 WINDSOR L WEST PALM BEACH, FL 33417 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1869957	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PEDULLA, JOSEPH 272 WINDSOR L WEST PALM BEACH, FL 33417				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when re-registering) 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 NAME STREET ADDRESS CITY-ST-ZIP	P PEDULLA, JOSEPH 272 WINDSOR L WEST PALM BEACH, FL 33417 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DEUTSCHMAN, TILLIE 264 WINDSOR L WEST PALM BEACH, FL 33417 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COLLINS, KARIN 260 WINDSOR L WEST PALM BEACH, FL 33417 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COLLINS, KAREN 268 WINDSOR L WEST PALM BEACH, FL 33417 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LANE, HENDRIKA 255 WINDSOR L WEST PALM BEACH, FL 33417 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOVICKI, DEE 257 WINDSOR L WEST PALM BEACH, FL 33417 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POPOWSKI, LEO 275 WINDSOR L WEST PALM BEACH, FL 33417 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS RIGIONE 271 WINDSOR L WEST PALM BEACH, FL 33417 ☐ 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 names empowered.					
SIGNATURE:			1/28/07 561-616-2625		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		