

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 07, 2004 8:00 am**  
**Secretary of State**

04-07-2004 90032 038 \*\*\*\*61.25

DOCUMENT # 742810

1. Entity Name

Windsor H Condominium  
Association, Inc.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

Windsor HC ULG 165

Suite, Apt. #, etc.

Century Village

City & State

West Palm Beach, FL

Zip

33417

Country

US

3. Mailing Address

Windsor HC ULG 165

Suite, Apt. #, etc.

Century Village

City & State

West Palm Beach, FL

Zip

33417

Country

US

DO NOT WRITE IN THIS SPACE

54027250

4. FEI Number

59-1657207

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name: Spanier, Joe

Street Address (P.O. Box Number is Not Acceptable)

165 Windsor H

Century Village

City

West Palm Beach

FL

Zip Code

33417

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

*Joseph Spanier*

4-2-04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25**

**Initial or Amended UBR**

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

TITLE	PD
NAME	Joe Spanier
STREET ADDRESS	165 Windsor H
CITY-ST-ZIP	W. Palm Beach, FL 33417
TITLE	VD
NAME	Gendron, Germaine
STREET ADDRESS	174 Windsor H
CITY-ST-ZIP	W. Palm Bch, FL. 33417
TITLE	TD
NAME	Linn, Elvira
STREET ADDRESS	122 East Hampton Way
CITY-ST-ZIP	Jupiter, FL. 33458
TITLE	SD
NAME	Spanier, Dorothy
STREET ADDRESS	165 Windsor H
CITY-ST-ZIP	W. Pm Bch, FL. 33417
TITLE	SP
NAME	Stackel, Joan
STREET ADDRESS	182 Windsor H
CITY-ST-ZIP	W. Pm Beach, FL 33417
TITLE	D
NAME	Bagliore, Anthony
STREET ADDRESS	176 Windsor H
CITY-ST-ZIP	W. Pm Beach, FL 33417

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Joseph Spanier*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-04

Date

Daytime Phone #

CR2E037B (12/02)