

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 27 AM 8:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 753772 (3)

1. Corporation Name

WINDING CREEK CONDOMINIUM CORPORATION

Principal Place of Business

Mailing Address

C/O SEABOARD ARBORS MANAGEMENT
1700 MCMULLEN BOOTH RD #C-3
CLEARWATER FL 34619

C/O SEABOARD ARBORS MANAGEMENT
1700 MCMULLEN BOOTH RD #C-3
CLEARWATER FL 34619

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/15/1980

3a. Date of Last Report

04/14/1994

4. FEI Number

59-2196876

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HICKS, JOYCE M.
1700 MCMULLEN BOOTH RD #C-3
CLEARWATER FL 34619

81 Name Lennard Leighton

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

C/O Seaboard Arbors Management Services, Inc.

83 1700 McMullen Booth Road, Suite C-3

84 City Clearwater, Fl.

FL

85 Zip Code 34619

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, and I, the undersigned, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person to whom name of registered agent and fee is applicable

(NOTE: Registered Agent signature required when registering)

DATE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

12. OFFICERS AND DIRECTORS
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VD
PENWARDEN, LLOYD
2400 WINDING CREEK BLVD
CLEARWATER FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
SWITZER, SKY
2400 WINDING CREEK BLVD.
CLEARWATER FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TD
THORNE, ETHEL
2400 WINDING CREEK BLVD
CLEARWATER FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
HOLZAPFEL, HELEN
2400 WINDING CREEK BLVD
CLEARWATER FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

D
Lemaire, Muriel
2400 Winding Creek Blvd., #14-201
Clearwater, Fl. 34621

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
BELLITTI, PHILLIP
2400 WINDING CREEK BLVD
CLEARWATER FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

D
Kearley, Roland
2400 Winding Creek Blvd., #1-104
Clearwater, Fl. 34621

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SD
DAURIO, DON
2400 WINDING CREEK BLVD
CLEARWATER FL

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

SD
Hamelin, Paul
2400 Winding Creek Blvd., #20A-200
Clearwater, Fl. 34621

☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 9.047(3)(b), Florida Statutes. I further certify that the information furnished on this annual report or supplemental annual 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 12 or Block 13, if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

SKY SWITZER

4/18/95

796-3817