

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jun 25, 2010**  
**Secretary of State**

DOCUMENT# 757673

**Entity Name:** WINDING WOOD RECREATION ASSOCIATION, INC.**Current Principal Place of Business:**2708 ALT. 19 NORTH  
SUITE 603  
PALM HARBOR, FL 34683**New Principal Place of Business:**5901 US HIGHWAY 19  
SUITE 7Q  
NEW PORT RICHEY, FL 34652**Current Mailing Address:**2708 ALT. 19 NORTH  
SUITE 603  
PALM HARBOR, FL 34683**New Mailing Address:**5901 US HIGHWAY 19  
SUITE 7Q  
NEW PORT RICHEY, FL 34652**FEI Number:** 59-2197655**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**PMS MANAGEMENT SERVICES, INC.  
2708 ALT. 19 NORTH  
SUITE 603  
PALM HARBOR, FL 34683 US**Name and Address of New Registered Agent:**QUALIFIED PROPERTY MANAGEMENT, INC.  
5901 US HIGHWAY 19  
SUITE 7Q  
NEW PORT RICHEY, FL 34652 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: MARY A WHITE

06/25/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SHEERAN, PETER  
Address: 5901 US HIGHWAY 19, SUITE 7Q  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VPD  
Name: VARONA, DARLEEN  
Address: 5901 US HIGHWAY 19, SUITE 7Q  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD  
Name: STEPP, ROBERT  
Address: 5901 US HIGHWAY 19, SUITE 7Q  
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby 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 all other like empowered.

SIGNATURE: MARY A WHITE

CEO

06/25/2010

Electronic Signature of Signing Officer or Director

Date