

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 24, 2009  
Secretary of State**

DOCUMENT# 758671

Entity Name: WINDERMERE OAKS PROPERTY OWNERS, INC.

**Current Principal Place of Business:**

DAVID THEOPHILUS  
509 JENNIFER LANE  
WINDERMERE, FL 34786 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 332  
WINDERMERE, FL 34786 US

**New Mailing Address:**

FEI Number: 59-2366081      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CRAIN, RANDALL  
501 JENNIFER LANE  
WINDERMERE, FL 34786 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: ST ( ) Delete  
Name: THEOPHILUS, DAVID  
Address: 506 JENNIFER LANE  
City-St-Zip: WINDERMERE, FL 34786

Title: ST ( ) Delete  
Name: THEOPHILUS, CHRISTINE  
Address: 506 JENNIFER LANE  
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Delete  
Name: CRAIN, RANDALL  
Address: 501 JENNIFER LANE  
City-St-Zip: WINDERMERE, FL 34786

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DAVID M. THEOPHILUS

ST

01/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date