2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#758822

FILED Apr 15, 2009 Secretary of State

Entity Name: TOWN HOMES OF WINTER GARDEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 900 S PARK AVE WINTER GARDEN, FL 34787 LIS **Current Mailing Address: New Mailing Address:** 1360 N. GOLDENROD RD SUITE 12 ORLANDO, FL 32807 US FEI Number: 59-2829937 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KL MANAGEMENT GROUP INC 1360 N. GOLDENROD RD SUITE 12 ORLANDO, FL 32807 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition OAKLEY, GARY Name: Name: 1360 N. GOLDENROD RD 12 Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: () Delete Title: (X) Change () Addition GOMEZ, CLEMENTE Name: RIVERA, AGRAIT Name: Address: 1360 N. GOLDENROD RD 12 Address: 1360 N. GOLDENROD RD 12 City-St-Zip: ORLANDO, FL 32807 City-St-Zip: ORLANDO, FL 32807 Title: PD() Delete Title: () Change () Addition FRANKS, SERGI Name: Name: 1360 N. GOLDENROD RD. 12 Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: MCCLOUD, JANE Name: 1360 N. GOLDENROD RD 12 Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: () Delete Title: (X) Change () Addition KAPANSKY, DONNA KOPANSKY, DONNA Name: Name: 1360 N. GOLDENROD RD 12 1360 N. GOLDENROD RD 12 Address: Address: ORLANDO, FL 32807 City-St-Zip: ORLANDO, FL 32807 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: KEITH R. KIEBZAK RA 04/15/2009