

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

FILED  
Apr 09 1996 8:00 am  
Secretary of State

DOCUMENT # **766993** (0)  
1. Corporation Name  
**THE WINDMILL MANOR RESIDENTS ASSOCIATION, INC.**



Principal Place of Business  
**5320 53RD AVENUE EAST  
BRADENTON FL 34203**

Mailing Address  
**5320 53RD AVENUE EAST  
BRADENTON FL 34203**

3. Date Incorporated or Qualified  
**02/15/1983**

3a. Date of Last Report  
**04/19/1995**

2. Principal Place of Business <b>21 same as mailing address</b>	2a. Mailing Address <b>26 5320 53rd. Ave East Lot Q94</b>	4. FEI Number <b>59-2551246</b>	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27 Lot Q94</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
City & State <b>23</b>	City & State <b>28 Bradenton, FL</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Zip <b>24</b>	Country <b>25</b>	Zip <b>29 34203</b>	Country <b>30 Manatee</b>

9. Name and Address of Current Registered Agent

**SWARTS, SIDNEY W.  
5320 53RD AVE EAST  
#Q94  
BRADENTON FL 34203**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Sidney W. Swarts* *Sidney W. Swarts, TREASURER* *03-29-96*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>GOFF, WILLIAM</b>		1.2 NAME <b>Paul Miller</b>	
STREET ADDRESS <b>5320 53 AVE E #V11</b>		1.3 STREET ADDRESS <b>5320 53rd. Ave. East Lot Q74</b>	
CITY-ST-ZIP <b>BRADENTON, FL 34203</b>		1.4 CITY-ST-ZIP <b>Bradenton, FL 34203</b>	
TITLE <b>V</b>	<input checked="" type="checkbox"/> DELETE	2.1 TITLE <b>Vice-President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>FLOWER, BARBARA</b>		2.2 NAME <b>Richard Noël</b>	
STREET ADDRESS <b>5320 53RD AVE E V-15</b>		2.3 STREET ADDRESS <b>5320 53rd. Ave. East Lot U1</b>	
CITY-ST-ZIP <b>BRADENTON, FL 34203</b>		2.4 CITY-ST-ZIP <b>Bradenton, FL 34203</b>	
TITLE <b>S</b>	<input type="checkbox"/> DELETE	3.1 TITLE <b>n/c</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>WARD, MARY</b>		3.2 NAME	
STREET ADDRESS <b>5320 E 53 AVE #X14</b>		3.3 STREET ADDRESS	
CITY-ST-ZIP <b>BRADENTON, FL 34203</b>		3.4 CITY-ST-ZIP	
TITLE <b>D</b>	<input checked="" type="checkbox"/> DELETE	4.1 TITLE <b>Board of Directos</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>PALAVIN, BARNEY</b>		4.2 NAME <b>Howard Hanke</b>	
STREET ADDRESS <b>5320 E 53 AVE #Q29</b>		4.3 STREET ADDRESS <b>5320 53rd. Ave. East Lot Q81</b>	
CITY-ST-ZIP <b>BRADENTON, FL 34203</b>		4.4 CITY-ST-ZIP	
TITLE <b>D</b>	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>MCKLOSKI, MABEL</b>		5.2 NAME <b>n/c</b>	
STREET ADDRESS <b>5320 E 53 AVE #U16</b>		5.3 STREET ADDRESS	
CITY-ST-ZIP <b>BRADENTON, FL 34203</b>		5.4 CITY-ST-ZIP	
TITLE <b>D</b>	<input checked="" type="checkbox"/> DELETE	6.1 TITLE <b>Board of Directors</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>KOHLBRAND, GEORGE</b>		6.2 NAME <b>James Johnson</b>	
STREET ADDRESS <b>5320 E 53 AVE #Z9</b>		6.3 STREET ADDRESS <b>5320 53rd. Ave. East Lot R20</b>	
CITY-ST-ZIP <b>BRADENTON, FL 34203</b>		6.4 CITY-ST-ZIP <b>Bradenton, FL 34203</b>	

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 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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 on an attachment with an address.

SIGNATURE: *Sidney W. Swarts* *SIDNEY W. SWARTS* *03-29-96* *941-756-2571*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)