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Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90117 007 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 766993

1. Corporation Name

THE WINDMILL MANOR RESIDENTS ASSOCIATION, INC.

Principal Place of Business

5320 53RD AVE EAST
 BRADENTON FL 34203
 US

Mailing Address

5320 53RD AVENUE EAST
 LOT Q-81
 BRADENTON FL 34203
 US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		02/15/1983	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2551246	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		Trust Fund Contribution	
24		29		30	

9. Name and Address of Current Registered Agent

HANKE, HOWARD W
 5320 53RD AVE E
 LOT Q-81
 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
FL	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		(NOTE: Registered Agent signature required when reinstating)		DATE	
Signature, typed or printed name of registered agent and title if applicable.					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	<input type="checkbox"/> DELETE	1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	POPE, RICHARD		1.2 NAME	VIOLA E. HANKE	
STREET ADDRESS	5320 53RD AVE E, LOT Z1-11		1.3 STREET ADDRESS	5320-53 AVE-E, LOT Q81	
CITY-ST-ZIP	BRADENTON, FL 34203		1.4 CITY-ST-ZIP	BRADENTON FL 34203	
TITLE	V	<input type="checkbox"/> DELETE	2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOSHAW, NANCY		2.2 NAME	GEORGE KRAUSE	
STREET ADDRESS	5320 53RD AVE E, LOT W-6		2.3 STREET ADDRESS	5320-53 AVE E, LOT V-14	
CITY-ST-ZIP	BRADENTON, FL 34203		2.4 CITY-ST-ZIP	BRADENTON FL 34203	
TITLE	S	<input type="checkbox"/> DELETE	3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MANGANO, HELEN		3.2 NAME	ROSEMARIE BOWMAN	
STREET ADDRESS	5320 53RD AVE E, LOT W-12		3.3 STREET ADDRESS	5320-53 AVE-E LOT Q 26	
CITY-ST-ZIP	BRADENTON, FL 34203		3.4 CITY-ST-ZIP	BRADENTON FL 34203	
TITLE	T	<input type="checkbox"/> DELETE	4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HANKE, HOWARD W		4.2 NAME	GLADYS GEORGIE	
STREET ADDRESS	5320 53RD AVE E, LOT Q-81		4.3 STREET ADDRESS	5320-53 AVE E, LOT Q43	
CITY-ST-ZIP	BRADENTON, FL 34203		4.4 CITY-ST-ZIP	BRADENTON FL 34203	
TITLE	D	<input checked="" type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, ROBERT		5.2 NAME		
STREET ADDRESS	5320 53RD AVE EAST LOT Q-32		5.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34203		5.4 CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLOGG, ED		6.2 NAME		
STREET ADDRESS	5320 53RD AVE E, LOT Y-15		6.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34203		6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** *Howard W Hanke - Treasurer* 941-756-8475

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #