


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 15, 2007 8:00 am**  
**Secretary of State**

02-15-2007 90047 001 \*\*\*\*61.25

<b>DOCUMENT # 766993</b>					
1. Entity Name <b>THE WINDMILL MANOR RESIDENTS ASSOCIATION, INC.</b>					
Principal Place of Business <b>5320 53RD AVE EAST BRADENTON FL 34203 US</b>			Mailing Address <b>5320 53RD AVENUE EAST LOT Q-81 BRADENTON FL 34203 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-2551246</b>	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>HANKE, HOWARD W 5320 53RD AVE E LOT Q-81 BRADENTON FL 34203</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P REINER, RAKLEEN 5320 53 AVE. E. LOT V-16 BRADENTON FL 34203	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RALEEN REIHER 5320-53 <sup>RD</sup> AVE E, LOT X16 BRADENTON FL 34203	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MCMEANS, JANICE 5320 53 AVE. E. LOT D-4 BRADENTON FL 34203	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MARIE NELSON 5316-53 <sup>RD</sup> AVE E, LOT Q103 BRADENTON FL 34203	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S COX, LIBBY 5320 53 AVE. E. LOT T-16 BRADENTON FL 34203	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CAROLYN SCHIMMEL 5320-53 <sup>RD</sup> AVE E, LOT Z 2-18	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HANKE, HOWARD W 5320 53RD AVE E, LOT Q-81 BRADENTON, FL 34203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TONY REVELER 5320-53 AVE E, LOT Q33 BRADENTON FL 34203	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FILI, PHILIP 5320-53 AVE E. LOT Q48 BRADENTON FL 34203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KRISTIN MASTRO 5320-53 AVE E, LOT Q84 BRADENTON FL 34203	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HUELSMAN, TOM 5320 53 AVE E. LOT U-13 BRADENTON FL 34203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D STEVE SARGENT 5320-53 AVE E. LOT Z-16 BRADENTON FL 34203	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Howard W. Hanke</u> <b>HOWARD W. HANKE</b> <u>FEB 7-2007</u> <u>941-756-8475</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					