FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 10 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H51902 (5)

1. Corporation Name

WINDMILL VILLAGE SOUTH HOME OWNERS ASSOCIATION I NCORPORATED

Principal Place of Business	Mailing Address
3000 NORTH TUTTLE AVENUE SARASOTA FL 34234	3000 NORTH TUTTLE AVENUE SARASOTA FL 34234

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/12/1985
3a. Date of Last Report: 01/28/1994

2. Principal Place of Business (21): Suite, Apt. #, etc. (22); City & State (23); Zip (24); Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27); City & State (28); Zip (29); Country (30)

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

STANLEY R. ROSSMAN
2965 ROCKWOOD COVE
SARASOTA FL 34234

10. Name and Address of New Registered Agent

81 Name: Robert Soutar
82 Street Address (P.O. Box Number Is Not Acceptable): 3010 Lamplighter
83:
84 City: Sarasota FL 85 Zip Code: 34234

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Robert Soutar PRESIDENT Robert Soutar 4/1/95
(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	P	1.1 TITLE	P ☒ Change ☐ Addition
NAME	ROSSMAN, STANLEY R	1.2 NAME	
STREET ADDRESS	2965 ROCKWOOD COVE	1.3 STREET ADDRESS	Robert Soutar
CITY-ST-ZIP	SARASOTA FL 34234	1.4 CITY-ST-ZIP	3010 Lamplighter,Sarasota Fl 34234
TITLE	S	2.1 TITLE	☐ Change ☐ Addition
NAME	STEINKUHLER, MARGARET	2.2 NAME	SAME
STREET ADDRESS	3399 BAY OAKS DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	VD ☒ Change ☐ Addition
NAME	DOWNING, HARRIETT	3.2 NAME	Donald Downing, Sr.
STREET ADDRESS	2993 REGENCY COVE	3.3 STREET ADDRESS	2993 Regency Cove
CITY-ST-ZIP	SARASOTA FL 34234	3.4 CITY-ST-ZIP	Sarasota Fl 34234
TITLE	T	4.1 TITLE	T ☒ Change ☐ Addition
NAME	MILLER, CHET	4.2 NAME	Jerry Kiska
STREET ADDRESS	2822 LAMPLIGHTER DR.	4.3 STREET ADDRESS	2929 Lamplighter
CITY-ST-ZIP	SARASOTA FL 34234	4.4 CITY-ST-ZIP	Sarasota Fl 34234
TITLE	D	5.1 TITLE	D ☒ Change ☐ Addition
NAME	SOUTAR, MARGARET	5.2 NAME	Doris James
STREET ADDRESS	2921 CIMARRON COVE	5.3 STREET ADDRESS	2918 Bay Aristocrat Dr.
CITY-ST-ZIP	SARASOTA FL 34234	5.4 CITY-ST-ZIP	Sarasota Fl 34234
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	SINCAVAGE, WILLIAM	6.2 NAME	SAME
STREET ADDRESS	3291 BAY OAKS DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	6.4 CITY-ST-ZIP	

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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert Soutar Robert Soutar 4/1/95 813-355-1238
SIGNATURE AND TYPED OR PRINTED NAME OF ENDING OFFICER OR DIRECTOR Date Telephone Number

0488311 FP