

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001970

FILED
Mar 17, 2009
Secretary of State

Entity Name: WYNDSONG HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

500 NW 43RD STREET
SUITE 3
GAINESVILLE, FL 32607

New Principal Place of Business:

14000 NW 11TH PL
NEWBERRY, FL 32669

Current Mailing Address:

500 NW 43RD STREET
SUITE 3
GAINESVILLE, FL 32607

New Mailing Address:

C/O ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607

FEI Number: 01-0671624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNERSTONE PROP SOLUTIONS OF N. CENT FL.
500 NW 43RD STREET
SUITE 3
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607 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: D JEFFREY SAUSAMAN

03/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHULTETUS, RAYMOND
Address: 14610 NW 11TH PLACE
City-St-Zip: NEWBERRY, FL 32669

Title: V () Delete
Name: STOROE, WILLIAM
Address: 1206 NW 150TH DR
City-St-Zip: NEWBERRY, FL 32669

Title: T () Delete
Name: CLEMONS, JANE A
Address: 1654 NW 11TH PLACE
City-St-Zip: NEWBERRY, FL 32669

Title: S () Delete
Name: DUNSE, CAROL
Address: 14568 NW 11TH PLACE
City-St-Zip: NEWBERRY, FL 32669

Title: D () Delete
Name: KENNEDY, CHAD
Address: 13125 SW 2ND AVE
City-St-Zip: NEWBERRY, FL 32669

Title: D () Delete
Name: WILKINSON, JEFF
Address: 14663 NW 11TH PLACE
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CLEMONS, JANE A
Address: 14654 NW 11TH PLACE
City-St-Zip: NEWBERRY, FL 32669

Title: S (X) Change () Addition
Name: HEISE, ARICA
Address: 14654 NW 11TH PLACE
City-St-Zip: NEWBERRY, FL 32669

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RAYMOND SCHULTETUS

P

03/17/2009

Electronic Signature of Signing Officer or Director

Date