


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90077 025 ****61.25

DOCUMENT # N02000001775 1. Entity Name WINDSOR VILLAGE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 721 WINDSOR LANE KEY WEST FL 33040		Mailing Address 721 WINDSOR LANE KEY WEST FL 33040			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 26-2680000	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent REYNOLDS, RICHARD T 721 WINDSOR LANE KEY WEST FL 33040				7. Name and Address of New Registered Agent Name REYNOLDS, RICHARD R. Street Address (P.O. Box Number is Not Acceptable) 721 WINDSOR LANE City KEY WEST FL Zip Code 33040	
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. RICHARD R. REYNOLDS SIGNATURE <u><i>Richard R Reynolds</i></u> 2-14-06 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE STD <input checked="" type="checkbox"/> Delete NAME HARTMAN, DAVID N STREET ADDRESS 721 WINDSOR LANE CITY-ST-ZIP KEY WEST FL 33040	TITLE STD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME REYNOLDS, RICHARD R. STREET ADDRESS 721 WINDSOR LANE CITY-ST-ZIP KEY WEST, FL 33040				
TITLE VD <input type="checkbox"/> Delete NAME DAYKIN, JUDITH STREET ADDRESS 727 WINDSOR LANE CITY-ST-ZIP KEY WEST FL 33040	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP				
TITLE PD <input type="checkbox"/> Delete NAME KOLO, THEODORE JR. STREET ADDRESS 727 WINDSOR LANE CITY-ST-ZIP KEY WEST FL 33040	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP				
TITLE MGR <input type="checkbox"/> Delete NAME REYNOLDS, RICHARD R STREET ADDRESS 721 WINDSOR LANE CITY-ST-ZIP KEY WEST FL 33040	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP				
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP				
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP				

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: *Richard R Reynolds* **2-14-06** **305 246-3155**
305 292-3341