

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005349

FILED
Apr 21, 2009
Secretary of State

Entity Name: WINDMILL LAKES V CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8842 SW 3 STREET
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

8842 SW 3 STREET
PEMBROKE PINES, FL 33025

New Mailing Address:

TDSUNSHINE PROPERTY MANAGEMENT
PO BOX 122015
FORT LAUDERDALE, FL 33312

FEI Number: 55-0838327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRALEY & OTTO, P.A.
2699 STIRLING ROAD C207
FT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: MANN, BRETT
Address: 8842 SW 3RD STREET, #202
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VS () Delete
Name: FOX, SARA
Address: 8734 SW 3RD STREET, #108
City-St-Zip: PEMBROKE PINES, FL 33025

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T () Change (X) Addition
Name: WILLIAMS, ELIZABETH
Address: 8768 SW 3RD STREET # 203
City-St-Zip: PEMBROKE PINES, FL 33025

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: BRETT MANN

PT

04/21/2009

Electronic Signature of Signing Officer or Director

Date