

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04470

FILED
Mar 23, 2009
Secretary of State

Entity Name: WINDMILL RANCH ESTATES MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

C/O THE CONTINENTAL GROUP
2950 N. 28 TERRACE
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

C/O THE CONTINENTAL GROUP
2950 N. 28 TERRACE
HOLLYWOOD, FL 33020 US

New Mailing Address:

FEI Number: 59-2587732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EICHNER, PAUL
BAKALAR & EICHNER, P.A.
150 SOUTH PINE SOUTH ISLAND RD, STE 540
PLANTATION, FL 33324 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: D () Delete
Name: NEMHAUSER, NANCY
Address: 2855 PADDOCK RD
City-St-Zip: WESTON, FL 33331

Title: PD () Delete
Name: FASS, JOEL
Address: 2955 LUCKIE RD.
City-St-Zip: FORT LAUDERDALE, FL 33331

Title: TD () Delete
Name: MASUR, WAYNE
Address: 2680 HUNTER CT.
City-St-Zip: FT. LAUDERDALE, FL

Title: SD () Delete
Name: SEIDLE, MICHELLE
Address: 2790 HACKNEY RD.
City-St-Zip: WESTON, FL 33331

Title: D () Delete
Name: COHEN, BRUCE
Address: 2775 PADDOCK RD.
City-St-Zip: WESTON, FL 33331

Title: VPD () Delete
Name: STERN, STEVE
Address: 3155 WILLOW LANE
City-St-Zip: FORT LAUDERDALE, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: SHAPIR, CAROLYN
Address: 3195 WILLOW LANE
City-St-Zip: WESTON, FL 33331

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: JOEL FASS

PD

03/23/2009

Electronic Signature of Signing Officer or Director

Date