

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jun 07, 2009  
Secretary of State**

DOCUMENT# N05000000165

**Entity Name:** THE VENTURA AT WINDSOR HILLS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779**New Principal Place of Business:**385 DOUGLAS AVENUE  
SUITE 3000  
ALTAMONTE SPRINGS, FL 32714**Current Mailing Address:**2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779**New Mailing Address:**385 DOUGLAS AVENUE  
SUITE 3000  
ALTAMONTE SPRINGS, FL 32714

FEI Number: 16-1715284

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:****Name and Address of New Registered Agent:**THE CONTINENTAL GROUP INC.  
385 DOUGLAS AVENUE  
3000  
ALTAMONTE SPRINGS, FL 32714 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: THE CONTINENTL GROUP INC

06/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: VPD ( ) Delete  
Name: CARTWRIGHT, RC  
Address: 401 SW 4TH AVE #408  
City-St-Zip: FORT LAUDERDALE, FL 33315Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: TSD ( ) Delete  
Name: MCCANN, JOHN M  
Address: 2504 TREELINE DR  
City-St-Zip: EASTON, PA 18040Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: PD ( ) Delete  
Name: AGGARWAL, SHASI  
Address: 730 NORDYKE RD  
City-St-Zip: CINCINNATI, OH 45255Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: D ( ) Delete  
Name: GIGLIO, FRANK J  
Address: 91 ROYAL AVE  
City-St-Zip: HAWTHORNE, NJ 07506Title: ( ) 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: JOHN MCCANN

TDS

06/07/2009

Electronic Signature of Signing Officer or Director

Date