

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005184

FILED  
Apr 17, 2007  
Secretary of State

**Entity Name:** WINDING RIVER PRESERVE HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

8009 S ORANGE AVENUE  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

8009 S ORANGE AVENUE  
ORLANDO, FL 32809

**New Mailing Address:**

**FEI Number:** 20-2866680

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LELAND MANAGEMENT  
8009 S ORANGE AVENUE  
ORLANDO, FL 32809 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: DP ( ) Delete  
Name: SMITH, JOHNNY  
Address: P. O. BOX 1065  
City-St-Zip: BRONSON, FL 32621

Title: DVP ( ) Delete  
Name: FAGAN, MICHAEL  
Address: P. O. BOX 600  
City-St-Zip: KEY LARGO, FL 33037

Title: DST ( ) Delete  
Name: DIAZ, HARVEY  
Address: 8550 DALKEITH LANE  
City-St-Zip: MIAMI LAKES, FL 33016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SMITH, JOHNNY M  
Address: P. O. BOX 1065  
City-St-Zip: BRONSON, FL 32621

Title: VP (X) Change ( ) Addition  
Name: FAGAN, MICHAEL  
Address: P. O. BOX 600  
City-St-Zip: KEY LARGO, FL 33037

Title: ST (X) Change ( ) Addition  
Name: DIAZ, HARVEY  
Address: 8550 DALKEITH LANE  
City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHNNY M SMITH

P

04/17/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date