

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011508

FILED
Apr 28, 2008
Secretary of State

Entity Name: ONE WINTER PARK, INC.

Current Principal Place of Business:

C/O GUY D. COLADO
1201 SOUTH ORLANDO AVENUE, SUITE 410
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

C/O GUY D. COLADO
1201 SOUTH ORLANDO AVENUE, SUITE 410
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 20-3778223 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLADO, GUY D
1201 S ORLANDO AVE SUITE 410
WINTER PARK, FL 32789 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: FRAZEE, RICHARD
Address: 9121 ENGLEWOOD ROAD
City-St-Zip: WINTER PARK, FL 32789

Title: PD () Delete
Name: COLADO, GUY D
Address: 1201 S ORLANDO AVE SUITE 410
City-St-Zip: WINTER PARK, FL 32789

Title: VPD () Delete
Name: STRONG, SHARON
Address: 155 STOVIN AVE
City-St-Zip: WINTER PARK, FL 32789

Title: SD () Delete
Name: WAGNER, MARGIE
Address: 181 W STOVIN AVE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: FLYNN, SALLY
Address: 1400 HIGHLAND RD
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: MAYNARD, LEE C
Address: 1531 BERKSHIRE AVE
City-St-Zip: WINTER PARK, FL 32789

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

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: GUY D. COLADO

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

Date