

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06724

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** WINDTREE PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

13330 W COLONIAL DR  
SUITE 250  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 770088  
WINTER GARDEN, FL 34787 US

**New Mailing Address:**

**FEI Number:** 59-3417469      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MASHBURN, ESQ., ERIC S  
102 EAST MAPLE STREET  
WINTER GARDEN, FL 34787 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: PD  
Name: FOLSOM, LYNN M  
Address: 121 W PLANT STREET  
City-St-Zip: WINTER GARDEN, FL 34787

Title: VD  
Name: HEIDT, ADELE  
Address: 121 W. PLANT STREET  
City-St-Zip: WINTER GARDEN, FL 34787

Title: STD  
Name: LACEY, JOANN  
Address: 121 W PLANT STREET  
City-St-Zip: WINTER GARDEN, FL 34787

I hereby 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 all other like empowered.

SIGNATURE: JO ANN LACEY

STD

04/29/2011

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

\_\_\_\_\_ Date