FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 1:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N08270 (3)

1. Corporation Name

WINDMILL POINTE VILLAGE CLUB ASSOCIATION, INC.

Principal Place of Business	Mailing Address
10722 GATEWAY AVENUE ORLANDO FL 32821	10722 GATEWAY AVENUE ORLANDO FL 32821

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/20/1985
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2503897 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WATTLES, ROBERT C., P.A.
200 EAST ROBINSON ST.
P O BOX 3306
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name: McGRATH, REGIS, PRESIDENT
82 Street Address (P.O. Box Number is Not Acceptable): 5509 WAGNER DRIVE
83
84 City: ORLANDO **FL** 85 Zip Code: 32821

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: REGIS McGRATH — 4/25/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	☒ Change ☐ Addition
NAME	MAZZIE, PETER	12 NAME	McGRATH, REGIS	
STREET ADDRESS	10841 WILLIAM & MARY CT.	13 STREET ADDRESS	5509 WAGNER DRIVE	
CITY-ST-ZIP	ORLANDO FL 32821	14 CITY-ST-ZIP	ORLANDO, FL. 32821	
TITLE	VD	21 TITLE	VP/D	☒ Change ☐ Addition
NAME	SCHILLER, FLORENCE	22 NAME	KELBERMAN, GERALD	
STREET ADDRESS	10743 WESTBROOK DR.	23 STREET ADDRESS	5548 WESTBROOK DRIVE	
CITY-ST-ZIP	ORLANDO FL 32821	24 CITY-ST-ZIP	ORLANDO, FL. 32821	
TITLE	TSD	31 TITLE	T/D	☒ Change ☐ Addition
NAME	OROPAL, EVELYN	32 NAME	SILVERMAN, LEON	
STREET ADDRESS	10766 WILDERNESS CT.	33 STREET ADDRESS	10664 WINDSOR COURT	
CITY-ST-ZIP	ORLANDO FL 32821	34 CITY-ST-ZIP	ORLANDO, FL. 32821	
TITLE		41 TITLE	S/D	☒ Change ☐ Addition
NAME		42 NAME	SCHILLER, FLORENCE	
STREET ADDRESS		43 STREET ADDRESS	10743 WESTBROOK DRIVE	
CITY-ST-ZIP		44 CITY-ST-ZIP	ORLANDO, FL. 32821	
TITLE		51 TITLE	D	☐ Change ☒ Addition
NAME		52 NAME	BROOKING, JANET	
STREET ADDRESS		53 STREET ADDRESS	10781 WHARTON COURT	
CITY-ST-ZIP		54 CITY-ST-ZIP	ORLANDO, FL. 32821	
TITLE		61 TITLE	D	☐ Change ☒ Addition
NAME		62 NAME	BROWN, DIANNA	
STREET ADDRESS		63 STREET ADDRESS	10719 WESTBROOK DRIVE	
CITY-ST-ZIP		64 CITY-ST-ZIP	ORLANDO, FL. 32821	

DP 5/18

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: REGIS McGRATH, PRESIDENT — 4/6/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

003447