

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N12717 (7)

1. Corporation Name

WINDERMERE HEIGHTS THIRD SECTION HOMEOWNERS ASSO
CIATION, INC.



Principal Place of Business

Mailing Address

1150 E. PLANT ST.
P.O. DRAWER 490
OCOE FL 34761-7490

1150 E. PLANT ST.
P.O. DRAWER 490
OCOE FL 34761-7490

3. Date Incorporated or Qualified
12/23/1985

3a. Date of Last Report
02/01/1995

2. Principal Place of Business

2a. Mailing Address

21 CyberNation, Inc.

26 c/o CyberNation, Inc.

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

22 Suite, Apt. #, etc. Suite 102
6000 S. Rio Grande Ave

27 Suite, Apt. #, etc. Suite 102
6000 S. Rio Grande Ave

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

23 City & State
Orlando, Florida

28 City & State
Orlando, Florida

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

24 Zip Country
32809 U.S.A.

29 Zip Country
32809 U.S.A.

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STARCHER, RICHARD T.
8121 OAK PARK ROAD
ORLANDO FL

81 Name
Mathew L. Hayden

82 Street Address (P.O. Box Number is Not Acceptable)
8100 Oak Park Road

83
Orlando,

84 City

FL

85 Zip Code
32819

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Mathew Hayden

MATHEW HAYDEN

4/1/96

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 ☒ DELETE
NAME LAMAN, GEORGE I.
STREET ADDRESS 1150 E. PLANT ST.
CITY - ST - ZIP WINTER GARDEN FL

1.1 TITLE Hayden, Mathew L. ☒ Change ☐ Addition
1.2 NAME President/D
1.3 STREET ADDRESS 8100 Oak Park Road
1.4 CITY - ST - ZIP Orlando, Florida 32819

TITLE VD ☐ DELETE
NAME LAMAN, GEORGE D.
STREET ADDRESS 8052 OAK PARK RD.
CITY - ST - ZIP ORLANDO FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE STD ☐ DELETE
NAME STARCHER, RICHARD L.
STREET ADDRESS 8121 OAK PARK ROAD
CITY - ST - ZIP ORLANDO FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS 900001841279
5.4 CITY - ST - ZIP -05/28/96--01045--000 043

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS ***61.25
6.4 CITY - ST - ZIP

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)(k), 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:

Mathew Hayden
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRES.
MATHEW HAYDEN, PRES.

4/1/96

(407) 888-8300
15 5-1-96