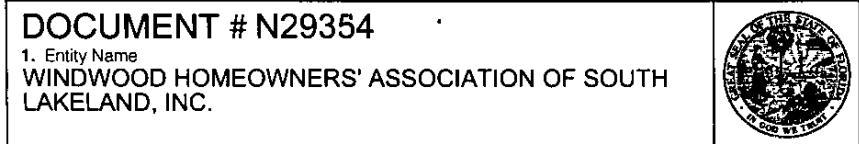


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

**FILED
May 09, 2007 8:00 am
Secretary of State**

05-09-2007 90102 020 ****61.25

DOCUMENT # N29354			
1. Entity Name WINDWOOD HOMEOWNERS' ASSOCIATION OF SOUTH LAKELAND, INC.			
Principal Place of Business 2029 WINDWOOD LN LAKELAND, FL 33813 US		Mailing Address 2029 WINDWOOD LN LAKELAND, FL 33813 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
DOUGHERTY, MARSHALL 2029 WINDWOOD LN LAKELAND, FL 33813		Name <i>JOSEPH DAVIS</i> Street Address (P.O. Box Number is Not Acceptable) <i>5829 WINDWOOD DR</i> City <i>LAKELAND</i> , FL Zip Code <i>33813</i>	
8. 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. I am familiar with, and accept the obligations of registered agent.			
<p>SIGNATURE _____</p> <p>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____</p> <p>Filing Fee is \$61.25 Due by May 1, 2007</p> <p>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees</p> <p>Make check payable to Florida Department of State</p>			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition <i>PD JOSEPH DAVIS 5829 WINDWOOD DR. LAKELAND, FL 33813</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition <i>T RICHARD L. WREE 5877 WINDWOOD DR LAKELAND, FL 33813</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Richard L. Wree</i>		Date <i>3/31/07</i> Daytime Phone # <i>863-665-5707</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

ATTACHMENT
40109231
Division of Corporations

Annual Report

Please review the filing for accuracy and the fee to file. If you need to make corrections, use your browser 'BACK' button, make the necessary changes and use the 'CONTINUE' button again. The filing information will be updated exactly as you have entered it. Once you have submitted the information, your filing cannot be updated, removed cancelled or refunded.

Document Number	N29354
Business Entity Name	WINDWOOD HOMEOWNERS' ASSOCIATION OF SOUTH LAKELAND, INC.
FEI Number	251570071
FEI Number Status	
Certificate of Status Desired	No
Election Campaign Financing Trust Fund Contribution	No

Principal Place of Business

Address	5877 WINDWOOD DRIVE
Suite, Apt. #, etc.	
City, State	LAKELAND, FL
Zip Code & Country	33813 US

Mailing Address

Address	5877 WINDWOOD DRIVE
Suite, Apt. #, etc.	
City, State	LAKELAND, FL
Zip Code & Country	33813 US

Name and Address of Registered Agent

Name (Last, First, Middle, Title)	RICHARD, WREE
Address	5877 WINDWOOD DRIVE
Suite, Apt. #, etc.	
City, State	LAKELAND, FL
Zip Code & Country	33813 US
Registered Agent	RICHARD WREE
Signature	

Officer/Director Name and Address #N29354

Title	PD
Name (Last, First, Middle, Title)	JOE, DAVIS
Street Address	5829 WINDWOOD DRIVE
City, State	LAKELAND, FL
Zip Code & Country	33813
 Title	 VP
Name (Last, First, Middle, Title)	MURPHY, MIKE
Street Address	2011 WINDWOOD LN
City, State	LAKELAND, FL
Zip Code & Country	33813
 Title	 S
Name (Last, First, Middle, Title)	ZLOBIK, ROBBIE
Street Address	5803 WINDWOOD DR
City, State	LAKELAND, FL
Zip Code & Country	33813
 Title	 T
Name (Last, First, Middle, Title)	RICHARD, WREE
Street Address	5877 WINDWOOD DR
City, State	LAKELAND, FL
Zip Code & Country	33813
 Title	 T
Officer/Director Signature	RICHARD WREE

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Document Tracking # - 000088798350

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E-mail Address

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40109231
#N29354

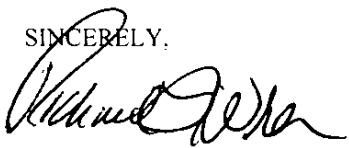
MAY 6, 2007

TO: FLORIDA DEPARTMENT OF STATE

I AM RETURNING THE COMPLETED FLORIDA DEPT. OF STATE ANNUAL REPORT FORM.

I BELIEVE THE FORM HAS BEEN PROPERLY COMPLETED AND ASSUME THEIR WILL BE NO PENALTY FOR LATE SUBMISSION AS I HAD ORIGINALLY COMPLETED THE FORM ON-LINE AND SUBMITTED A CHECK ON MARCH4, 2007.

SINCERELY,



RICHARD L. WREE
TREASURER
WINDWOOD HOMEOWNERS' ASSOCIATION