

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41499

FILED  
Apr 29, 2006  
Secretary of State

**Entity Name:** WINDERMERE RESERVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

HORIZON CIRCLE  
WINDERMERE, FL 34786 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1262  
WINDERMERE, FL 34786

**New Mailing Address:**

**FEI Number:** 59-2334884

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RUSSELL, R.L.  
537 NORTH MAGNOLIA AVENUE  
ORLANDO, FL 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: T ( ) Delete  
Name: KALIDAS, DINESHKUMAR  
Address: 7075 HORIZON CIRCLE  
City-St-Zip: WINDERMERE, FL 34786

Title: S ( ) Delete  
Name: CLARK, KAREN L  
Address: 7105 HORIZON CIRCLE  
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Delete  
Name: RICCI, ROBERT  
Address: 7086 HORIZON CIRCLE  
City-St-Zip: WINDERMERE, FL

Title: VP ( ) Delete  
Name: MENTA, VIPIN  
Address: 9043 KERR COURT  
City-St-Zip: ORLANDO, FL 34786

Title: P ( ) Delete  
Name: AMAR, DANNY  
Address: 7054 HORIEON CIR  
City-St-Zip: WINDERMERE, FL 34786

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: DINESH KALIDAS

T

04/29/2006

Electronic Signature of Signing Officer or Director

Date