

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 31, 2004 8:00 am
Secretary of State

03-31-2004 90023 034 ****61.25

DOCUMENT # N44651			
1. Entity Name WINTER RIDGE CONDOMINIUM HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 90 WINTER RIDGE RD WINTER HAVEN FL 33881 US		Mailing Address 90 WINTER RIDGE RD WINTER HAVEN FL 33881 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

44023167



MOORE CR2E037 (11/03)

6. Name and Address of Current Registered Agent GARNER, ALICIA 152 WINTER RIDGE DR WINTER HAVEN FL 33881		7. Name and Address of New Registered Agent Name Edmund RAWLES Street Address (P.O. Box Number is Not Acceptable) 90 WINTER Ridge Road City WINTER HAVEN FL Zip Code 33881	
--	--	--	--

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.

SIGNATURE Edmund RAWLES Ed Rawles 3-29-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
--	---	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE DD DIRECTOR ☐ Delete	NAME DAILEY, BILL	TITLE PRESIDENT ☐ Change ☒ Addition	NAME WILMA JONES
STREET ADDRESS 261 WINTER RIDGE BLVD	CITY-ST-ZIP WINTER HAVEN FL 33881	STREET ADDRESS 56 WINTER Ridge Rd	CITY-ST-ZIP WINTER HAVEN FL 33881
TITLE SD ☐ Delete	NAME LONGO, BETTY	TITLE VICE PRESIDENT ☐ Change ☒ Addition	NAME RICHARD BRYANT
STREET ADDRESS 528 WINTER TERRACE	CITY-ST-ZIP WINTER HAVEN FL 33881	STREET ADDRESS 611 Ridge TERR	CITY-ST-ZIP WINTER HAVEN FL 33881
TITLE VPD ☐ Delete	NAME CATALANO, MARGARET	TITLE TREASURER ☐ Change ☒ Addition	NAME LYN GRUBER
STREET ADDRESS 515 WINTER TERRACE	CITY-ST-ZIP WINTER HAVEN FL 33881	STREET ADDRESS 86 WINTER RIDGE RD	CITY-ST-ZIP WINTER HAVEN FL 33881
TITLE TD ☐ Delete	NAME SANFORD, FRED	TITLE SECRETARY ☐ Change ☒ Addition	NAME JEANNE HUTN
STREET ADDRESS 243 WINTER RIDGE BLVD	CITY-ST-ZIP WINTER HAVEN FL 33881	STREET ADDRESS 375 WINTER Ridge Blvd	CITY-ST-ZIP WINTER HAVEN FL 33881
TITLE D ☐ Delete	NAME GUILFORD, ROBIN	TITLE DIRECTOR ☐ Change ☒ Addition	NAME GERRY ZAPPONE
STREET ADDRESS 101 WINTER RIDGE DR	CITY-ST-ZIP WINTER HAVEN FL 33881	STREET ADDRESS 319 WINTER RIDGE Blvd	CITY-ST-ZIP WINTER HAVEN FL 33881
TITLE ☐ Delete	NAME	TITLE ☐ Change ☐ Addition	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Wilma L. Jones - Wilma L. Jones, President 3-28-04 863-298-0151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #