2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2005 8:00 am
Secretary of State
02-21-2005 90061 007 ****61.25

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1. Entity Name
WINDSOR PARKE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
10036 SAWGRASS DR., STE. 1 PONTE VEDRA BCH., FL 32082 US	10036 SAWGRASS DR., STE. 1 PONTE VEDRA BCH., FL 32082 US

02082005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2527889 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~ARENAS, PAT~~ MAY MANAGEMENT 10036 SAWGRASS DR., STE. 1 PONTE VEDRA BCH., FL 32082	Name: MAY Management Services, Inc Street Address (P.O. Box Number is Not Acceptable) 5455 A1A South City St. Augustine FL Zip Code 32080

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 Cynthia H O'Neil Vice President 2/9/04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE
CYNTHIA H. O'NEIL

Filing Fee is $61.25
Due by May 1, 2005

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHINE, SCOTT 4390 RICHMOND PARK DR E JACKSONVILLE, FL 32224	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P.D.	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MEDINA, ERNIE 4039 GLENHURST DRIVE NORTH JACKSONVILLE, FL 32224	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Saylor, Richard 13782 Holland Park Dr Jacksonville, Fl 32224	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GOLD, ROBERT 4026 EAST WINDSOR PARK DR JACKSONVILLE, FL 32234	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Lyonnais, Dennis 13792 Aresbury Ct Jacksonville, Fl. 32224	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LYNCH, MIKE 13823 SUTTON PARK N JACKSONVILLE, FL 32224	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Putz, Joe 4398 Richmond Parke E Jacksonville, Fl. 32224	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COOK, HENRY 13819 HOLLAND PARK DR JACKSONVILLE, FL 32224	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Pujol, Monserrat 13700 Sutton Park Dr Apt 112 Jacksonville, Fl. 32224	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PATEL, ANIL 13400 SUTTON PARK DR #1604 JACKSONVILLE, FL 32224	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D O'Neil, Kevin 13857 Windsor Parke Ct Jacksonville, Fl. 32224	☐ Change ☑ Addition

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: Scott Shine
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #