

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004443

FILED  
Jan 31, 2010  
Secretary of State

**Entity Name:** WINCHESTER COVE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

22 RENEE COURT  
ROCKLEDGE, FL 32955 US

**New Principal Place of Business:**

25 RENEE COURT  
ROCKLEDGE, FL 32955 US

**Current Mailing Address:**

22 RENEE COURT  
ROCKLEDGE, FL 32955 US

**New Mailing Address:**

24 RENEE COURT  
ROCKLEDGE, FL 32955 US

**FEI Number:** 59-3204276

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOLDMAN, MITCHELL  
22 RENEE COURT  
ROCKLEDGE, FL 32955 US

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

MACEO, JORGE  
25 RENEE COURT  
ROCKLEDGE, FL 32955 US

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: JORGE MACEO

01/31/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPD  
Name: PAILLE, LINDA  
Address: 24 RENEE COURT  
City-St-Zip: ROCKLEDGE, FL 32955

Title: SD  
Name: PRICE, THERESA  
Address: 11 WINCOVE LANE  
City-St-Zip: ROCKLEDGE, FL

Title: PD  
Name: MACEO, JORGE  
Address: 25 RENEE COURT  
City-St-Zip: ROCKLEDGE, FL 32955

Title: TD  
Name: PAILLE, LINDA  
Address: 24 RENEE COURT  
City-St-Zip: ROCKLEDGE, FL 32955

I hereby 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 all other like empowered.

SIGNATURE: LINDA PAILLE

TD

01/31/2010

Electronic Signature of Signing Officer or Director

Date