

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State
 05-18-2001 91562 041 ****61.25

DOCUMENT # N95000000472

1. Entity Name

WINFIELD HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2115 KORAT LANE
 ORLANDO FL 32810
 US

P O BOX 941871
 MAITLAND FL 32794-1871
 US

2. Principal Place of Business

2115 Korat Lane

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Maitland FL

City & State

Zip

32751

Country

Zip

Country

4. FEI Number

59-3325590

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FEULNER, JEFFREY ESQ
 180 PARK AVE N STE 200
 WINTER PARK FL 32789**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PDC	<input type="checkbox"/> Delete
NAME	FEULNER, JEFFREY EDQ	
STREET ADDRESS	2115 KORAT LN	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE	VD	<input type="checkbox"/> Delete
NAME	PARKER, BILL	
STREET ADDRESS	2115 KORAT LN	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DOWD, KATE	
STREET ADDRESS	2115 KORAT LN	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE	TD	<input type="checkbox"/> Delete
NAME	RICH, KYLE	
STREET ADDRESS	2115 KORAT LN	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE	SD	<input type="checkbox"/> Delete
NAME	WITTNER, TERRY	
STREET ADDRESS	2115 KORAT LN	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FEULNER, JEFFREY ESQ	
STREET ADDRESS	2115 Korat Lane	
CITY-ST-ZIP	Maitland FL 32751	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2115 Korat Lane	
CITY-ST-ZIP	Maitland FL 32751	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SD	
STREET ADDRESS	RICH, KYLE	
CITY-ST-ZIP	2115 Korat Lane	
	Maitland, FL 32751	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TD	
STREET ADDRESS	Terry Wittner	
CITY-ST-ZIP	2115 Korat Lane	
	Maitland FL 32751	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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 title empowered.

SIGNATURE:

SIGNATURE REQUIRED
Jeffrey Faulner

3/8/01

(407)647-8911

CR2E037 (10/00)