

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90151 031 ****61.25

DOCUMENT # N95000001338

1. Entity Name
**WINDSOR MOBILE HOME PARK HOMEOWNERS
ASSOCIATION OF KISSIMMEE, INC.**



Principal Place of Business
**C/O JOHN C. COYLE
4 SATURN CIRCLE
KISSIMMEE, FL 34746**

Mailing Address
**C/O JOHN C. COYLE
4 SATURN CIRCLE
KISSIMMEE, FL 34746**

50009044



03312006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business
BARRY SWIFT

3. Mailing Address
BARRY SWIFT

Suite, Apt. #, etc.
53 URANIUS ST.

Suite, Apt. #, etc.
53 URANIUS ST.

City & State
KISSIMMEE, FL

City & State
KISSIMMEE, FL

Zip
34746

Zip
34746

4. FEI Number
59-3337884

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**KNAPP, LINDA
6 UNIVERSAL DR
KISSIMMEE, FL 34746**

7. Name and Address of New Registered Agent

Name
WOOD, MARILYN B.

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

15 MARS LANE

City
KISSIMMEE

FL

Zip Code
34746

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 Marilyn B. Wood, Secy. 4/3/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
BENSCH, ROBERT
102 UNIVERSAL DR
KISSIMMEE, FL 34746** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
WATTS, EDIE
16 MARS LANE
KISSIMMEE, FL 34746** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
WOOD, HARILYN
15 MARS LANE
KISSIMMEE, FL 34746** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
KNAPP, LINDA
6 UNIVERSAL DR
KISSIMMEE, FL 34746** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
BARRY SWIFT
53 URANIUS ST.
KISSIMMEE - FL 34746** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
JOYCE STOCKHOLM
11 PLUTO LANE
KISSIMMEE - FL 34746** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Marilyn B Wood 4/3/06 407-343-6263
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #