

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

4/11

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-12-2004 90303 043 ****61.25

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DOCUMENT # N95000001829 1. Entity Name MAGNOLIA PARK OF WINDERMERE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 4434 BEGONIA CT WINDERMERE, FL 34786 US			Mailing Address 4434 BEGONIA CT WINDERMERE, FL 34786 US		
2. Principal Place of Business 4403 Begonia Ct.		3. Mailing Address PO BOX 553		03252004 Chg-NP CR2E037 (10/03) 4. FEI Number 59-3343459	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State WINDERMERE FL		City & State GOTHA FL			
Zip 34786		Country U.S.A.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WINCEY, ANN D 4434 BEGONIA CT WINDERMERE, FL 34786				7. Name and Address of New Registered Agent Name ERIC HOEBBEL Street Address (P.O. Box Number is Not Acceptable) 4403 Begonia Ct. City WINDERMERE FL Zip Code 34786	
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 4/5/04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$81.25 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 NAME STREET ADDRESS CITY-ST-ZIP	DP MCGINLEY, ELIZABETH A 4457 BEGONIA CT WINDERMERE, FL 34786	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PRESIDENT ERIC J. HOEBBEL 4403 BEGONIA CT. WINDERMERE, FL 34786	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD KOERBER, E. WILLIAM 4465 BEGONIA CT WINDERMERE, FL 34786	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD VICE-PRESIDENT JOHN OCTAVIANO 13524 MAGNOLIA PK CT. WINDERMERE, FL 34786-7413	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WINCEY, ANN 4434 BEGONIA CT WINDERMERE, FL 34786	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SECRETARY LISA C. DAVENPORT 13557 MAGNOLIA PARK CT. WINDERMERE, FL 34786	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VERMILLION, MARY ANN 13517 MAGNOLIA PARK CT WINDERMERE, FL 34786	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VICE ASST. SECRETARY ERROL L SAROUDER 13516 MAGNOLIA PK. CT. WINDERMERE, FL 34786	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR GENE LEE 4474 BEGONIA CT WINDERMERE, FL 34786	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ 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:			Date: 4/5/04 Daytime Phone #: (407) 656-2722		