2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002837

FILED Jan 27, 2009 Secretary of State

Entity Name: WINCHESTER ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2664 WINCHESTER CIR. EUSTIS, FL 32726 US **Current Mailing Address: New Mailing Address:** 2664 WINCHESTER CIR EUSTIS, FL 32726 FEI Number: 59-7052900 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PEREIRA, JOSE A 2664 WINCHESTER CIR. EUSTIS, FL 32726 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PEREIRA, JOSE A Name: Name: Address: 2664 WINCHESTER CIR. Address: City-St-Zip: EUSTIS, FL 32726 US City-St-Zip: Title: () Delete Title: (X) Change () Addition LOFTUS, KATHLEEN Name: Name: BARLEY, PETER Address: 2667 WINCHESTER CIR. Address: 2643 WINCHESTER CIR. City-St-Zip: EUSTIS, FL 32726 US City-St-Zip: EUSTIS, FL 32726 US Title: () Delete Title: () Change () Addition SCHAUTZ, GLENN Name: Name: 2694 WINCHESTER CIR Address: Address: City-St-Zip: EUSTIS, FL 32726 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: TESKEY, STEPHANIE Name: TURELL, MARIA 2672 WINCHESTER CIRCLE 2663 WINCHESTER CIRCLE Address: Address: City-St-Zip: EUSTIS, FL 32726 City-St-Zip: EUSTIS, FL 32726

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOSE A PEREIRA P 01/27/2009