

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90070 043 ****61.25

DOCUMENT # N99000007576

1. Entity Name
WINONA HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
**157 WINONA CIR
AUBURNDALE, FL 33823**

Mailing Address
**157 WINONA CIR
AUBURNDALE, FL 33823**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

151 Winona Circle

Suite, Apt. #, etc.

151 Winona Cir

City & State

Auburndale, FL

City & State

Auburndale, FL

Zip

33823

Country

PUIC

Zip

33823

Country

PUIC

02072007 Chg-NP CR2E037 (12/06)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PUSKAR, KEVIN
157 WINONA CIR
AUBURNDALE, FL 33823**

7. Name and Address of New Registered Agent

Name **Ken Bulman**

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

151 Winona Circle

City

Auburndale, Florida

FL

Zip Code

33823

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

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9/28/07

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

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	D	<input checked="" type="checkbox"/> Delete
NAME	BOALCH, MICHAEL	
STREET ADDRESS	202 WINONA CIR	
CITY-ST-ZIP	AUBURNDALE, FL 33823	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	PUSKAR, KEVIN	
STREET ADDRESS	157 WINONA CIRCLE	
CITY-ST-ZIP	AUBURNDALE, FL 33823	
TITLE	TD	<input type="checkbox"/> Delete
NAME	GATLIN, CARRIE	
STREET ADDRESS	112 WINONA CIR	
CITY-ST-ZIP	AUBURNDALE, FL 33823	
TITLE	D	<input type="checkbox"/> Delete
NAME	POMYKALSKI, KEN	
STREET ADDRESS	148 WINONA CIRCLE	
CITY-ST-ZIP	AUBURNDALE, FL 33823	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	SILVER, MARK	
STREET ADDRESS	312 WINONA COURT	
CITY-ST-ZIP	AUBURNDALE, FL 33823	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MUNSON, KENNETH	
STREET ADDRESS	318 WINONA CRT	
CITY-ST-ZIP	AUBURNDALE, FL 33823	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert Langsack	
STREET ADDRESS	237 Winona Circle	
CITY-ST-ZIP	Auburndale, FL 33823	
TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ken Bulman	
STREET ADDRESS	151 Winona Circle	
CITY-ST-ZIP	Auburndale, FL 33823	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Michael Taylor	
STREET ADDRESS	154 Winona Circle	
CITY-ST-ZIP	Auburndale, FL 33823	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jack Mason	
STREET ADDRESS	150 Winona Circle	
CITY-ST-ZIP	Auburndale, FL 33823	

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/07

Date

863 533-4543

Daytime Phone #