

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132115

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: WINDERMERE CUSTOM HOMES, INC.

**Current Principal Place of Business:**

277 OLIVIA ROSE CT  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

277 OLIVIA ROSE CT.  
LAKE MARY, FL 32746

**New Mailing Address:**

FEI Number: 04-3731804

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DONIKOWSKI, STANLEY  
277 OLIVIA ROSE CT.  
LAKE MARY, FL 32746 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MATARAZZO, JOSEPH P  
Address: 104 VIEW POINT PL  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete  
Name: DONIKOWSKI, STANLEY  
Address: 277 OLIVIA ROSE CT.  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STANLEY DONIKOWSKI

VP

04/27/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date