2008 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT DOCUMENT # P94000074949 FILED 1. Entity Name WINDERMERE PROPERTY HOLDINGS, INC. 08 APR 24 AM 7: 41 Principal Place of Business Mailing Address ZEUNLIANT OF STATE TALLAHASSEE, FLORIDA 9350 CONROY WINDERMERE ROAD 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786 WINDERMERE, FL 34786 03312008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3272517 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPDIRECT AGENTS, INC. DO NOT WRITE 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 400125291094 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE VOSS, JEFFERSON R NAME STREET ADDRESS 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786 CITY-ST-ZIP TITLE NAME LEWIS, VIVIENNE 9350 CONROY WINDERMERE ROAD STREET ADDRESS CITY-ST-ZIP WINDERMERE, FL 34786 STD TITLE NAME THAKKAR, RASESH 9350 CONROY WINDERMERE ROAD STREET ADDRESS DO NOT WRITE CITY-ST-ZIP WINDERMERE FL 34786 TITLE IN THIS SPACE PIERCY, TYLER V NAME STREET ADDRESS 9350 CONROY WINDERMERE ROAD CITY-ST-ZIP WINDERMERE, FL 34786 TITLE NAME STREET ADDRESS CITY-ST-7IP

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 truster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

eff Voss

4114108

107-909 -9000

Daytime Phone #