

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000062466

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: THE GARDENS AT VILLAGE OF WINDERMERE, INC.

## Current Principal Place of Business:

7065 WESTPOINTE BLVD  
SUITE 319  
ORLANDO, FL 32835 US

## Current Mailing Address:

P. O. BOX 618147  
ORLANDO, FL 32861 US

## New Principal Place of Business:

7065 WESTPOINTE BLVD  
SUITE 318  
ORLANDO, FL 32835 US

## New Mailing Address:

FEI Number: 59-3459455      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIMBACK, KEN  
7065 WESTPOINTE BLVD  
SUITE 319  
ORLANDO, FL 32835 US

## Name and Address of New Registered Agent:

AZZOUZ, KEVIN H  
7065 WESTPOINTE BLVD  
SUITE 318  
ORLANDO, FL 32835 US

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: KEVIN H AZZOUZ

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: SEEBACH, JOSEPH W  
Address: 7065 WESTPOINTE BLVD. SUITE 319  
City-St-Zip: ORLANDO, FL 32835

Title: D ( ) Delete  
Name: AZZOUZ, KEVIN H  
Address: 7065 WESTPOINTE BLVD. SUITE 319  
City-St-Zip: ORLANDO, FL 32825

Title: DV ( ) Delete  
Name: BALLINGER, DAVID A  
Address: 3300 S. HIAWASSEE ROAD, SUITE 106  
City-St-Zip: ORLANDO, FL 32835

Title: D ( ) Delete  
Name: GRAY, KEVIN E  
Address: 3300 S. HIAWASSEE ROAD, SUITE 106  
City-St-Zip: ORLANDO, FL 32835

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: SEEBACH, JOSEPH W  
Address: 7065 WESTPOINTE BLVD. SUITE 318  
City-St-Zip: ORLANDO, FL 32835

Title: D (X) Change ( ) Addition  
Name: AZZOUZ, KEVIN H  
Address: 7065 WESTPOINTE BLVD. SUITE 318  
City-St-Zip: ORLANDO, FL 32825

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 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: KEVIN H AZZOUZ

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date