## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P9900001371					FILE	D	
1. Entity Name WINDERMERE PROPERTY DEVELOPMENT, INC.				— tar			
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Principal Plac		DOAD	l JA	LUNLTÄRT () LLAHASSEE,	TOTALE FLORIDA		
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	O NOI WAITE	ICE	4. FEI Number 59-3553567		Applied For Not Applicable		
÷			5. Certificate of Status I	Desired []	\$8.75 Additional		
	6. Name and Address of Current	Registered Agent	<u>.</u>	S. Certificate of Status L	лезнец ГЛ	Fee Required	
G. Haine and Address of Current regulatera Agent							
CORPDIRECT AGENTS, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301				DO NO	<b>FWRITI</b>	Ε ,	
				IN THIS SPACE			
				114 11110	SPACE	<del></del>	
O The share							
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)  DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.  9. Election Campaign Financing Trust Fund Contribution.  9. Election Campaign Financing Added to Fees 200125291012 04/23/0801026005 **3965.00							
After M	ay 1, 2008 Fee will be \$550.	Trust Fund Contributio	n. 🔲 Ádd	04/23/08-	-0102600	5 **3965.00	
10.	OFFICERS AND	DIRECTORS	_				
NAME	VOSS, JEFFERSON R						
STREET ADDRESS CITY-ST-ZIP	9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786 VTD						
TITLE				tn,			
NAME	LEWIS, VIVIENNE		D4 4/24				
STREET ADDRESS CITY-ST-ZIP	9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786			7 . 4 1		·	
TITLE			<del></del>		•		
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12. I hereby	certify that the information swedied will	This filing does not qualify for the	exemptions contained	d in Chapter 119. Florida S	Statutes. I further ce	ertify that the information	
12. I hereby certify that the information supplied with this filling 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 indicated on this report or supplemental report is true and indicated on this report or the receiver or trustee employed 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 with all other like emplowered.							
SIGNATURE:  SQUATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Daytime Prior 8  Daytime Prior 8							