


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 21, 2006 8:00 am**  
**Secretary of State**

03-21-2006 90029 028 \*\*\*\*61.25

<b>DOCUMENT # 757086</b>					
1. Entity Name WYNDEMERE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 98 WYNDEMERE WAY NAPLES, FL 34105 US			Mailing Address 98 WYNDEMERE WAY NAPLES, FL 34105 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
03062006 Chg-NP				CR2E037 (11/05)	
4. FEI Number 59-2104741				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SAMOOCE, MURRELL & GAL, P.A. 5405 PARK CENTRAL COURT NAPLES, FL 34109			Name <u>Samouce, Murrell &amp; Gal, P.A.</u> Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUCKEY, WARREN 98 WYNDEMERE WAY NAPLES, FL 34105	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Hagman, William 224 Via Napoli Naples, FL 34105	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DUNCAN, MARTIN 98 WYNDEMERE WAY NAPLES, FL 34105	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BIRTWISTLE, JOCLYN 98 WYNDEMERE WAY NAPLES, FL 34105	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Johnston, Robert 300 Wyndemere Way, Unit 205-C Naples, FL 34105	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZARROLI, CAM 98 WYNDEMERE WAY NAPLES, FL 34105	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BASLER, JOHN 98 WYNDEMERE WAY NAPLES, FL 34105	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLOOM, RODNEY 98 WYNDEMERE WAY NAPLES, FL 34105	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Payne, Pat 360 Edgemere Way East Naples, FL 34105	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 employed.					
SIGNATURE: <u>John H. Basler</u>			Date: <u>3-7-06</u>		Daytime Phone #: <u>239-263-0761</u>
JOHN BASLER					



ATTACHMENT  
40035498  
#757086

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SAMOUCE, MURRELL & GAL, P.A.

www.smg-law.net

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5405 Park Central Court  
Naples, Florida 34109

Robert C. Samouce  
Robert E. Murrell  
Alfred F. Gal, Jr.

Telephone (239) 596-9522  
Facsimile (239) 596-9523

January 9, 2006

Wyndemere Homeowners Association Inc.  
98 Wyndemere Way  
Naples, FL 34105

**Re:** Address change

Dear Sir/Madam:

According to current records on file with the Secretary of State in Tallahassee, our firm is listed as the Registered Agent for your firm. Please note the correct name and mailing address of our firm below and make the necessary changes when you file your 2006 Annual Report.

Samouce, Murrell & Gal, P.A.  
5405 Park Central Court  
Naples, FL 34109

Thank you for your prompt attention to this matter.

Kind regards,  
SAMOUCE, MURRELL & GAL, P.A.

A handwritten signature in black ink, appearing to read 'Nichol Sarviss'.

Nichol Sarviss  
Receptionist  
For the Firm