

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759206

Entity Name: WINDOVER OF COCOA CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1050 N. FISKE BLVD
401
COCOA, FL 32922**Current Mailing Address:**1050 N FISKE BLVD
401
COCOA, FL 32922 US**FEI Number:** 59-2119717**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SLATER, CAROLYN
1050 N FISKE BLVD
#401
COCOA, FL 32922 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:** CAROLYN SLATER

04/28/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PORTER, KERRY S
Address 1204 WAHNETA COURT
City-State-Zip: KISSIMMEE FL 34759

Title SECRETARY
Name SLATER, CAROLYN
Address 1050 N FISKE BLVD
 APT 401
City-State-Zip: COCOA FL 32922

Title VP
Name SLATER, CAROLYN
Address 1050 N FISKE BLVD
 APT 401
City-State-Zip: COCOA FL 32922

Title OFFICER
Name GOHIL, RANDY
Address 670 RIVER MOORNINGS DR
City-State-Zip: MERRITT ISLAND FL 32953

Title OFFICER
Name SARAVO, LOUIS
Address 6936 LOG JAM COURT
City-State-Zip: OCOEE FL 34761

Title TREASURER
Name SLATER, MICHAEL P
Address 1050 N FISKE BLVD
 APT # 401
City-State-Zip: COCOA FL 32922

Title OFFICER
Name ALKHAMMAL, A. J.
Address 7109 YACHT BASIN AVE
 # 437
City-State-Zip: ORLANDO FL 32835

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CAROLYN SLATER

V. PRESIDENT

04/28/2025

Electronic Signature of Signing Officer/Director Detail

Date