

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000000165

**FILED**  
**Feb 18, 2021**  
**Secretary of State**  
**4649942717CC**

**Entity Name:** THE VENTURA AT WINDSOR HILLS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PARKWAY SUITE 101  
MAITLAND, FL 32751

**Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PARKWAY SUITE 101  
MAITLAND, FL 32751 US

**FEI Number: 16-1715284**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WEBNER, SARAH ESQ  
860 N ORANGE AVENUE  
SUITE 135  
ORLANDO, FL 32801 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title SECRETARY  
Name KURZ, SHEILA  
Address C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PARKWAY  
SUITE 101  
City-State-Zip: MAITLAND FL 32751

Title VP  
Name MCCANN, JOHN  
Address C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PARKWAY  
SUITE 101  
City-State-Zip: MAITLAND FL 32751

Title PRESIDENT  
Name GOTTLIEB, MARK  
Address C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PARKWAY  
SUITE 101  
City-State-Zip: MAITLAND FL 32751

Title TREASURER  
Name CAPPUCCINO, THOMAS  
Address C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PARKWAY  
SUITE 101  
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR  
Name SHIROLE, ARUNPRAKASH  
Address C/O FIRSTSERVICE RESIDENTIAL  
2300 MAITLAND CENTER PARKWAY  
SUITE 101  
City-State-Zip: MAITLAND FL 32751

*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: MARK GOTTLIEB**

**PRESIDENT**

**02/18/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date