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: LISE BLANTON

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N0500003792

Entity Name: THE EQUESTRIAN AT WINDING CREEK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1401 8TH AVENUE WEST BRADENTON, FL 34205

Current Mailing Address:

PO BOX 843 ELLENTON, FL 34222 US

FEI Number: 20-2298577

Name and Address of Current Registered Agent:

NAJMY THOMPSON ATTORNEYS AT LAW 1401 8TH AVENUE WEST BRADENTON, FL 34205 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	STEPHEN THOMPSON			09/25/2023
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	DIRECTOR	Title	DIRECTOR	
Name	BLANTON, LISE	Name	LAMBERTON, CODY	
Address	PO BOX 843	Address	PO BOX 843	
City-State-Zip:	ELLENTON FL 34222	City-State-Zip:	ELLENTON FL 34222	
Title	DIRECTOR			
Name	WENTZEL, THEODORE			
Address	PO BOX 843			
City-State-Zip:	ELLENTON FL 34222			

PRESIDENT

09/25/2023

Date

FILED Sep 25, 2023 Secretary of State 9027483108CC

Certificate of Status Desired: No