2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006952

Entity Name: WINDMILL VILLAGE HOMEOWNERS ASSOCIATION, INC.

FILED
May 01, 2013
Secretary of State
CC4316297559

Current Principal Place of Business:

499 WINDMILL BLVD.

NORTH FORT MYERS, FL 33903

Current Mailing Address:

499 WINDMILL BLVD.

NORTH FORT MYERS. FL 33903

FEI Number: 20-8208889 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHIELDS, CHRISTOPHER, JATTY 1833 HENDRY STREET FORT MYERS, FL 33901 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 PD Title VPD

NameTHOMAS, SHARRONNameCOMSTOCK, JAMESAddress385 BERGEN STREETAddress351 HANS BRINKER

City-State-Zip: NORTH FORT MYERS FL 33903 City-State-Zip: NORTH FORT MYERS FL 33903

Title D Title SD

Name AUBIN, DAN Name SMITH, LAURA

Address 303 NETHERLAND AVENUE Address 499 WINDMILL BLVD.

City-State-Zip: NORTH FORT MYERS FL 33903 City-State-Zip: NORTH FORT MYERS FL 33903

Title D

Name LINDSEY, KIRK
Address 499 WINDMILL BLVD.

City-State-Zip: NORTH FORT MYERS FL 33903

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: SHARRON THOMAS PRESIDENT

Electronic Signature of Signing Officer/Director Detail

05/01/2013 Date