

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37240

Entity Name: WINTER PARK IMPROVEMENT FOUNDATION, INC.

Current Principal Place of Business:

151 W. LYMAN AVE.
WINTER PARK, FL 32789

Current Mailing Address:

PO BOX 280
WINTER PARK, FL 32790

FEI Number: 59-3035266

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAPIN, PATRICK
151 W. LYMAN AVENUE
WINTER PARK, FL 32789 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 DVPS
Name CHAPIN, PATRICK W
Address 151 W. LYMAN AVE
City-State-Zip: WINTER PARK FL 32789

Title D
Name MARTINEZ, MARITZA
Address 36 W. PINE ST., SUITE 106
City-State-Zip: ORLANDO FL 32801

Title D
Name BUTTS, DANIEL
Address P.O. BOX 3010
City-State-Zip: WINTER PARK FL 32790

Title C
Name WILSON, REBECCA
Address 215 NORTH EOLA DRIVE
City-State-Zip: ORLANDO FL 32801

Title P
Name NIMKOFF, LOU
Address 1095 W. MORSE BLVD., SUITE 5
City-State-Zip: WINTER PARK FL 32789

Title T
Name MCELVEEN, STEVEN
Address 609 W. KING STREET
City-State-Zip: ORLANDO FL 32804

Title D
Name CINDY, LAFRONZ BOWMAN
Address 1000 HOLT AVENUE
City-State-Zip: WINTER PARK FL 32789

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: PATRICK CHAPIN

EXEC. V.P.

02/17/2016

Electronic Signature of Signing Officer/Director Detail

Date