

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000001829

**Entity Name:** MAGNOLIA PARK OF WINDERMERE HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 15, 2018**  
**Secretary of State**  
**CC8635936305**

**Current Principal Place of Business:**

13517 MAGNOLIA PARK CT  
WINDERMERE, FL 34786

**Current Mailing Address:**

P.O. BOX 553  
GOTHA, FL 34734 US

**FEI Number: 59-3343459**

**Certificate of Status Desired: No**

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

VERMILLION, MARY ANN  
13517 MAGNOLIA PARK CT  
WINDERMERE, FL 34786 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: MARY ANN VERMILLION**

**04/15/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           WALKER, PAUL  
Address        4482 BEGONIA COURT  
City-State-Zip: WINDERMERE FL 34786

Title           AT LARGE  
Name           DAVENPORT, LISA  
Address        4473 BEGONIA CT  
City-State-Zip: WINDERMERE FL 34786

Title           SECRETARY  
Name           CORCORAN, MIKE  
Address        13549 MAGNOLIA PARK CT  
City-State-Zip: WINDERMERE FL 34786

Title           VP  
Name           ZIOLKOWSKI, RONALD  
Address        4465 BEGONIA COURT  
City-State-Zip: WINDERMERE FL 34786

Title           TREASURER  
Name           VERMILLION, MARY ANN  
Address        13517 MAGNOLIA PARK CT  
City-State-Zip: WINDERMERE FL 34786

*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: MARY ANN VERMILLION**

**TREASURER**

**04/15/2018**

Electronic Signature of Signing Officer/Director Detail

Date