2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State
03-19-2001 90391 028 ****61.25

DOCUMENT # 725498

1. Entity Name

WINDWARD BAY, INC.

Principal Place of Business	Mailing Address
4888 GULF OF MEXICO DR. LONGBOAT KEY FL 34228	4888 GULF OF MEXICO DR. LONGBOAT KEY FL 34228

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1683876 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LOBECK, DANIEL J THE COURTVIEW BUILDING 2033 MAIN STREET, Suite 403 SARASOTA FL 34237	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LINTON, TED 4800 GULF OF MEXICO DRIVE #206 LONGBOAT KEY FL 34228	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BEVERLY P. SHAPIRO 4700 GULF OF MEXICO DRIVE #303 LONGBOAT KEY FL 34228 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GOLDEN, ART 4600 GULF OF MEXICO DRIVE #201 LONGBOAT KEY FL 34228 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LARRY P. STEAGALL 4700 GULF OF MEXICO DRIVE #PH5 LONGBOAT KEY FL 34228 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BIELAT, LARRY 4600 GULF OF MEXICO DRIVE #206 LONGBOAT KEY FL 34228	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S COHEN, ED 4974 GULF OR MEXICO DRIVE LONGBOAR KEY FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAYAN, JAY 4970 GULF OF MEXICO DR LONGBOAT KEY FL ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GORNOWICZ, CAROLYN 4960 Gulf of Mexico Drive #PH3 Longboat Key, FL 34228 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RYALL, BOB 4840 GULF OF MEXICO DR LONGBOAT KEY FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED MARCH 8, 2001 941 383 3571
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #