2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Aug 01, 2007 8:00 am Secretary of State

DOCUMENT # 725593 1. Entity Name THE WINDJAMMER CONDOMINIUM ASSOCIATION OF COCOA BEACH, INC.					08-01-2007 90034 029 ****61.25				
Principal Place of Business 555 FILLMORE AVENUE CAPE CANAVERAL, FL 32920 Mailing Address 555 FILLMORE AVENU CAPE CANAVERAL, FL									
2. Principal Pl	lace of Business - No P.O. Box #	3. Mailing Address	. Mailing Address			11111 1111 11101	<u> </u>	RIRII RIBLI DIRII	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			07122007 Chg-NP CR2E037 (12/06)				
City & State		City & State			4. FEI Number 59-177635	51		<u> </u>	plied For t Applicable
Zip	Country	Zip	Zip Country		5. Certificate of S	tatus Desired	□ \$	8.75 Addi ee Required	itional
	6. Name and Address of Current F	Registered Agent		····	7. Name and Add	dress of New	Registered Ag	gent	
PRINCE, RALPH P				Name GL	ENN R.	STO	М		
555 FILLMORE AVE. UNITE #508 CAPE CANAVERAL, FL 32920			S	Street Address (I	P.O. Box Number is	Not Acceptab AVENIA	ie) E ,unit	# 50	م)د
				City				Zip Code	,
The above named entity submits this statement for the purpose of changing its registered of the purpose of the purp					PECANA VERAL FL 32920				
	named entity submits this statement for ions of registered agent.	the purpose of changing his	registered t	stree or register	ed agent, or both, if	I the State of F	ionua. Tantia	# WILLIA	and accept
SIGNATURE	Hem D Signature, typed or printed name of registered agent a	eston	. Basistand As				7/18/	07	
	Signature, typed or printed harne or registered agent a	поше паррисацие. (NOTE	: negistered Age	ent signature required	when reinstaling)		UAIE V		
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16. Thereby certify that the information supplied with this internation 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/07

Daytime Phone #