

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727867

FILED
Mar 02, 2009
Secretary of State

Entity Name: WINDJAMMER VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4489 WINDJAMMER LN
FT. MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

4489 WINDJAMMER LN
#2
FT. MYERS, FL 33919 US

New Mailing Address:

FEI Number: 59-1526141 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAID ASSOCIATION MANAGEMENT
4489 WINDJAMMER LN
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MANOS, SUSAN
Address: 4391-2A FOREMART CIR
City-St-Zip: FORT MYERS, FL 33919

Title: VPD () Delete
Name: SCOTT, JUDIE
Address: 4396 BOWSPRIT CT., 4A
City-St-Zip: FORT MYERS, FL 33919

Title: DT () Delete
Name: LUNDGREN, CAROLE
Address: 4406 FOREMAST CT
City-St-Zip: FORT MYERS, FL 33919

Title: PD () Delete
Name: WILLINGHAM, WYLLY
Address: 4417 SPANKER CT., 4A
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: ARMSTRONG, BILL
Address: 4396 BOWSPRIT CT. 2B
City-St-Zip: FORT MYERS, FL 33919

Title: SD () Delete
Name: RUSSELL, DAVID
Address: 4414 SPENCER CT. 3D
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MANOS, SUSAN
Address: 4391-2A FOREMAST CT
City-St-Zip: FORT MYERS, FL 33919

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: WILLINGHAM, WYLLY
Address: 4396 WINDJAMMER LANE
City-St-Zip: FORT MYERS, FL 33919

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WYLLY WILLINGHAM

P

03/02/2009

Electronic Signature of Signing Officer or Director

_____ Date