2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730109

FILED Mar 20, 2006 Secretary of State

Entity Name: ISLAND WINDS CONDOMINIUM BATH AND RACQUET CLUB ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 6612 ESTERO BLVD FORT MYERS BEACH, FL 339314546 **Current Mailing Address: New Mailing Address:** 6612 ESTERO BLVD FORT MYERS BEACH, FL 339314546 FEI Number: 59-1998327 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BECKER, POLIAKOFF & STREITFELD, P.A. 14241 METROPOLIS AVE. SUITE 100 FT MYERS, FL 339120000 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete GROSS, WILLIAM, FREIBURGER, JIM Name: Name: 4381 CRESTLINE DR. Address: 116 GOODRICH LAKE DR. Address: City-St-Zip: ANN ARBOR, MI 48103 City-St-Zip: COLON, MI 49040 Title: DV () Delete Title: () Change () Addition HUNTER, VERN Name: Name: Address: 450 W MAIN STREET Address: City-St-Zip: MERIDEN, CT 06451 City-St-Zip: Title: DS () Delete Title: () Change () Addition NUSBAUM, BILL Name: Name: Address: 4265 BAYVIEW DR Address: City-St-Zip: STURGEON BAY, WI 54235 City-St-Zip: () Delete (X) Change () Addition Title: Title: D BRYAN, RAY Name: Name: REIS, TIM 4238 WEST RIDGE ROAD 55 EAST PARK DRIVE Address: Address: City-St-Zip: GARY, IN 46405 City-St-Zip: HEBRON, OH 43025 Title: () Delete DΡ Title: () Change () Addition HILL, GALE Name: Name: #1 HAY BARN LANE Address: Address: City-St-Zip: CHESTERFIELD, MO 63017 City-St-Zip: Title: () Delete Title: () Change () Addition MUZYKA, RICHARD Name: Name: Address: 6612 ESTERO BLVD. #1203 Address: FORT MYERS BEACH, FL 33931 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GALE HILL DP 03/20/2006