

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733574

FILED
Apr 09, 2009
Secretary of State

Entity Name: WEST WIND ESTATES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

RESORT MANAGEMENTT
834 BALD EAGLE DR.
MARCO ISLAND, FL 34145 US

New Principal Place of Business:

301 JOSEPH LANE
NAPLES, FL 34114 US

Current Mailing Address:

RESORT MANAGEMENTT
834 BALD EAGLE DR.
MARCO ISLAND, FL 34145 US

New Mailing Address:

RESORT MANAGEMENT
834 BALD EAGLE DR.
MARCO ISLAND, FL 34145 US

FEI Number: 59-1647091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
ATTN: GREGORY MARLER
999 VANDERBILT BEACH RD. SUITE 501
NAPLES, FL 34108 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: T () Delete
Name: BROWER, SUSIE
Address: 201 OCEAN REEF LANE
City-St-Zip: NAPLES, FL 34114

Title: D () Delete
Name: JAMES, WOOD
Address: 171 OCEAN REEF LANE
City-St-Zip: NAPLES, FL 34114

Title: D () Delete
Name: JONES, DUDLEY
Address: 261 ISLAMORADA LANE
City-St-Zip: NAPLES, FL 34114

Title: V () Delete
Name: DANGLER, DEVON
Address: 211 INDIAN KEY LANE
City-St-Zip: NAPLES, FL 34114

Title: S () Delete
Name: CARR, JOHN
Address: 140 GRASSY KEY LANE
City-St-Zip: NAPLES, FL 34114

Title: D () Delete
Name: BECKER, KARL
Address: 141 PINE KEY LANE
City-St-Zip: NAPLES, FL 34114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: BROUWER, SUSIE
Address: 201 OCEAN REEF LANE
City-St-Zip: NAPLES, FL 34114

Title: PD (X) Change () Addition
Name: JAMES, WOOD
Address: 171 OCEAN REEF LANE
City-St-Zip: NAPLES, FL 34114

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

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

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: SUSIE BROUWER

T

04/09/2009

Electronic Signature of Signing Officer or Director

_____ Date