

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744821

FILED
Mar 16, 2011
Secretary of State

Entity Name: THE SOUTHWIND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5499 S. ATLANTIC AVE.
#903
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

5499 S. ATLANTIC AVE.
#903
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 59-1954748 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROONEY, PATRICIA A
5499 S. ATLANTIC AVE. #1103
NEW SMYRNA BEACH, FL 32167 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: VPD
Name: HUMPHREY, FRED M
Address: 3002 DADE AVE
City-St-Zip: ORLANDO, FL 32804

Title: D
Name: GERSTEN, KENNETH
Address: 299 EVANSDALE ROAD
City-St-Zip: LAKE MARY, FL 32764

Title: SD
Name: WALCHENBACH, DOROTHY
Address: 1136 BARKER ROAD #35
City-St-Zip: PITTSFIELD,, MA 01201

Title: TD
Name: DAVES, JOHN
Address: 2621 S. COUNTY RD. 419
City-St-Zip: CHULUOTA, FL

Title: PD
Name: ROONEY, PATRICIA A
Address: 5499 S. ATLANTIC AVE #1103
City-St-Zip: NEW SMYRNA BEACH, FL 32169

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA A ROONEY

PRES

03/16/2011

Electronic Signature of Signing Officer or Director

Date