

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Feb 18 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 746002 (5)**  
1. Corporation Name  
**WINDWARD EAST CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business		Mailing Address	
3080 N ATLANTIC AVE #109 COCOA BEACH FL 32931 US		3060 N ATLANTIC AVE #109 COCOA BEACH FL 32931 US	
21	2. Principal Place of Business	2a	Mailing Address
22	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
23	City & State	27	City & State
24	Zip	29	Zip
25	Country	30	Country

3. Date Incorporated or Qualified  
**02/19/1979**

4. FEI Number  
**59-1861702**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?  
 Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

**9. Name and Address of Current Registered Agent**

**KRAUS, ED**  
**3080 NO ATLANTIC AVE. STE 207**  
**COCOA BEACH FL 32931**

**10. Name and Address of New Registered Agent**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVP	1.1 TITLE	P
NAME	MCDONALD, HUGH	1.2 NAME	MCDONALD, HUGH
STREET ADDRESS	3060 N. ATLANTIC AVENUE, 101	1.3 STREET ADDRESS	3060 N. ATLANTIC AVE #101
CITY - ST - ZIP	COCOA BEACH FL	1.4 CITY - ST - ZIP	COCOA BEACH, FL 32931
TITLE	SD	2.1 TITLE	SD
NAME	HOSELTON, PHEBE	2.2 NAME	HIGGS, MORTON
STREET ADDRESS	3060 N ATLANTIC AVENUE SUITE605	2.3 STREET ADDRESS	3060 N. ATLANTIC AVE #611
CITY - ST - ZIP	COCOA BEACH FL	2.4 CITY - ST - ZIP	COCOA BEACH, FL 32931
TITLE	DT	3.1 TITLE	
NAME	WELKEN, RALPH	3.2 NAME	
STREET ADDRESS	3060 N ATLANTIC AVE S412	3.3 STREET ADDRESS	
CITY - ST - ZIP	COCOA BEACH FL	3.4 CITY - ST - ZIP	
TITLE	P	4.1 TITLE	DVP
NAME	KRAUS, ED	4.2 NAME	BOWERS, DICK
STREET ADDRESS	3080 NO ATLANTIC AVE. STE 207	4.3 STREET ADDRESS	3060 N. ATLANTIC AVE #501
CITY - ST - ZIP	COCOA BEACH FL	4.4 CITY - ST - ZIP	COCOA BEACH, FL 32931
TITLE	DVP	5.1 TITLE	DVP
NAME	FLOTO, JAMES	5.2 NAME	HARER, KATHLEEN
STREET ADDRESS	3060 N ATLANTIC AVENUE SUTE 405	5.3 STREET ADDRESS	3040 N. ATLANTIC AVE UNIT D
CITY - ST - ZIP	COCOA BEACH FL	5.4 CITY - ST - ZIP	COCOA BEACH, FL 32931
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.	
SIGNATURE: <i>[Signature]</i>	

**SIGNATURE:** *[Signature]* **2/12/98 401-783-6592**

CR2E037 (10/97)