

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767169

FILED
Apr 07, 2009
Secretary of State

Entity Name: LEEWARD CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

% JEANETTE MCCAY
BIRMINGHAM, AL 35223

New Principal Place of Business:

Current Mailing Address:

3605 WESTCHESTER CIR
BIRMINGHAM, AL 35223

New Mailing Address:

% JEANETTE MCCAY
BIRMINGHAM, AL 35223

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FORRESTER, A.J.
ROUTE 2, BOX 3460
PT. WASHINGTON, FL 32459 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: TS () Delete
Name: MCCAY, JEANETTE
Address: 3605 WESTCHESTER CIR
City-St-Zip: BIRMINGHAM, AL 35223

Title: P () Delete
Name: FORRESTER, ALICE
Address: ROUTE 2, BOX 3460
City-St-Zip: PT. WASHINGTON, FL

Title: D () Delete
Name: HACKER, CHARLES
Address: 49 ALDEN AVE.
City-St-Zip: ATLANTA, GA 30309

Title: D () Delete
Name: HENDRIX, THOMAS
Address: 303 CASELTON WAY
City-St-Zip: MARIETTA, GA

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: MCCAY, JEANETTE
Address: 3605 WESTCHESTER CIR
City-St-Zip: BIRMINGHAM, AL 35223

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

Title: VP (X) Change () Addition
Name: HACKER, CHARLES
Address: 49 ALDEN AVE.
City-St-Zip: ATLANTA, GA 30309

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

Title: D () Change (X) Addition
Name: UZAR, TIM
Address: 12 BRIGHTLING LANE
City-St-Zip: NEWMAN, GA 30265

Title: S () Change (X) Addition
Name: MCCAY, TRACY
Address: 3613 WESTCHESTER CIRCLE
City-St-Zip: BIRMINGHAM,, AL 35223

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: JEANETTE MCCAY

T

04/07/2009

Electronic Signature of Signing Officer or Director

_____ Date