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1997 MAY 19 PM 2:28

SECRETARY OF STATE TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT

96- **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N 09410 ( )

1. Corporation Name

WINDRUSH NORTH - II CONDOMINIUM ASSOCIATION, INC

[redacted]

REINSTATEMENT 96 YLP 5/20/97

Principal Place of Business	Mailing Address
4037 U.S. HWY 19 N. SUITE 129 TARPON SPRINGS FL 34689	c/o Community Acctg & Mgmt 4037 U.S. HWY 19 N. SUITE 129 TARPON SPRINGS FL 34689

3. Date Incorporated or Qualified: 05 22 1985
3a. Date of Last Report: 07 23 96

2. Principal Place of Business	2a. Mailing Address
21 c/o Community Acctg & Mgmt	26 40347 US 19 N, Ste 129
Suite, Apt. #, etc. 22 Suite #129	Suite, Apt. #, etc. 27 Suite #129
City & State 23 Tarpon Springs FL	City & State 28 Tarpon Springs FL
Zip: 24 34689 Country: 25 Pinellas	Zip: 29 34689 Country: 30 Pinellas

4. FEI Number: [redacted] 59-2496594 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Janet K. Spoonster c/o Premiere Management Services, Inc. 40347 US HWY 19 N., # 113 TARPON SPRINGS FL 34689	81 Name: Janet K. Spoonster 82 Street Address (P.O. Box Number is Not Acceptable): c/o Community Accounting & Management, Inc. 83: 40347 US 19 N, Ste #129 84 City: Tarpon Springs FL 85 Zip Code: 34689

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: Janet K. Spoonster — JANET K. SPOONSTER — 5/15/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when submitting) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	PD ☐ DELETE	1.1 TITLE	Pres/Dir ☒ Change ☐ Addition
NAME	Howard Goodman	1.2 NAME	Kulak, Sharon
STREET ADDRESS	340 Windrush Loop	1.3 STREET ADDRESS	346 Windrush Loop
CITY-ST-ZIP	Tarpon Springs FL 34689	1.4 CITY-ST-ZIP	Tarpon Springs FL 34689
TITLE	XXX Treas. ☐ DELETE	2.1 TITLE	Treas. ☒ Change ☐ Addition
NAME	Morrison, Barbara	2.2 NAME	Morrison, Barbara
STREET ADDRESS	343 Windrush Loop	2.3 STREET ADDRESS	343 Windrush Loop
CITY-ST-ZIP	Tarpon Springs FL 34689	2.4 CITY-ST-ZIP	Tarpon Springs FL 34689
TITLE	XXX Director ☐ DELETE	3.1 TITLE	VPres/Dir ☒ Change ☐ Addition
NAME	Roselle, Dominick	3.2 NAME	Fred Daniels
STREET ADDRESS	341 Windrush Loop	3.3 STREET ADDRESS	336 Windrush Loop
CITY-ST-ZIP	Tarpon Springs FL 34689	3.4 CITY-ST-ZIP	Tarpon Springs Fl 34689
TITLE	Sec/Dir ☐ DELETE	4.1 TITLE	Director ☒ Change ☐ Addition
NAME	Kulak, Sharon	4.2 NAME	Roselle, Dominick
STREET ADDRESS	346 Windrush Loop	4.3 STREET ADDRESS	341 Windrush Loop
CITY-ST-ZIP	Tarpon Springs FL 34689	4.4 CITY-ST-ZIP	Tarpon Springs FL 34689
TITLE	☐ DELETE	5.1 TITLE	Director ☐ Change ☒ Addition
NAME		5.2 NAME	Evans, Jim
STREET ADDRESS		5.3 STREET ADDRESS	332 Windrush Loop
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Tarpon Springs FL 34689
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	700021869??--4
STREET ADDRESS		6.3 STREET ADDRESS	-05/21/97--01099--002
CITY-ST-ZIP		6.4 CITY-ST-ZIP	****297.50 ****297.50

CR2E037 (9/96)

14. I do 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: Janet K. Spoonster — 4/6/97 — (813) 934-3250