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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N12618

(7)

WINDRUSH NORTH - III CONDOMINIUM ASSOCIATION, IN

C. Principal Place of Business Mailing Address 40347 U.S. 19N S 113 40347 U.S. 19N S 113 TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 3a. Date of Last Report 07/31/1996 3. Date Incorporated or Qualified 12/18/1985 Mailing Address
6 COMMUNITY 2. Principal Place of Business 4. FEI Number Applied For 59-2831235 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country This corporation has liability for intangible tax under s. 199.032, 3468 24 25 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SPOONSTER, JANET K Street Address (P.O. Box Number is Not Acceptable) 82 40347 U.S. 19N S 113 83 TARPON SPRINGS FL 34689 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE □ DELETE 1.1 TITLE Change Addition NAME NORMAN, RICHARD 1.2 NAME 312 N FLORIDA AVE #352 1.3 STREET ADDRESS STREET ADDRESS TARPON SPRINGS FL 34689 CITY-ST-20P 1.4 City - St - ZiF DELETE TITLE 2.1 TITLE Change ___ Addition SELLAS, CATHERINE NAME 22 NAME 18905 EDENBERRY DRIVE STREET ADDRESS 2.3 STREET ADDRESS **NORTHYLLE MI** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change ■ Addition MCCARTHY, RICHARD 3.2 NAME 312 N FLORIDA AVE #353 STREET ADDRESS 3.3 STREET ADDRESS TARPON SPGS FL 34689 CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE TITLE **VPD** 4.1 TITLE ■ Addition NAME ANIA. JOSEPH 4 2 NAME 357 WINDRUSH LOOP STREET ADDRESS 4.3 STREET ADDRESS TARPON SPRINGS FL 34689 CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP

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 changes, or on an attachment with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ DELETE

SIGNATURE:

THILE

NAME

STREET ADDRESS

CITY-ST-7IP

4/16/97

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(83) 934-3250

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FILED

Apr 23 1997 8:00am

Secretary of State