

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13709

FILED
Apr 11, 2006
Secretary of State

Entity Name: COMPASS POINT SOUTH AT WINDSTAR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

265 AIRPORT RD. S.
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

265 AIRPORT RD. S.
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0154844 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

R & P PROPERTY MANAGEMENT ASSOCIATES
265 AIRPORT RD. S.
NAPLES, FL 34105 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: VD () Delete
Name: SCHMITZ, NORMAN
Address: 3554 HALDEMAN CREEK DRIVE # 132
City-St-Zip: NAPLES, FL 34112

Title: TD () Delete
Name: WILDMAN, CHARLES
Address: 3570 HALDEMAN CREEK DRIVE #135
City-St-Zip: NAPLES, FL 34112

Title: SD () Delete
Name: MCDONNELL, NANCY
Address: 3538 HALDEMAN CREEK DR #133
City-St-Zip: NAPLES, FL 34112

Title: PD () Delete
Name: SOLLECITO, JOHN
Address: 3554 HALDEMAN CREEK DRIVE #115
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: SCHMIDT, FRED
Address: 3570 HALDERMAN CREEK DRIVE #136
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: LOCEY, LEONARD
Address: 5169 LOCHWOOD COURT
City-St-Zip: NAPLES, FL 34112

Title: TD (X) Change () Addition
Name: MACLEOD, ROBERT
Address: 3570 HALDEMAN CREEK DRIVE #134
City-St-Zip: NAPLES, FL 34112

Title: SD (X) Change () Addition
Name: DALLMAN, RICHARD
Address: 3554 HALDEMAN CREEK DR #135
City-St-Zip: NAPLES, FL 34112

Title: PD (X) Change () Addition
Name: MCDONNELL, NANCY
Address: 3538 HALDEMAN CREEK DRIVE #133
City-St-Zip: NAPLES, FL 34112

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GLENN CARROLL

Electronic Signature of Signing Officer or Director

PRES

04/11/2006

Date