2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17289

FILED Feb 06, 2009 Secretary of State

Entity Name: WESTWIND LAKES GARDEN HOMES CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 6511 SW 152 CT MIAMI, FL 33193 **Current Mailing Address: New Mailing Address:** C/O THE CONTINENTIAL GRP 11981 SW 144 CT., #201 MIAMI, FL 33186 FEI Number: 65-0001138 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SKRLD INC 201 ALHAMBRE CR 1201 CORAL GABLES, FL 33134 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition LOCKWOOD, DENNIS RODRIGO, CARMELO Name: Name: 11981 SW 144 CT, #201 Address: 6446 S.W. 152 PLACE Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33193 Title: VPD () Delete Title: () Change () Addition Name: MADERA, NESTOR Name: Address: 11981 SW 144 CT., #201 Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: Title: () Delete Title: () Change () Addition ROJAS, PATRICIA Name: Name: 11981 SW 144 CT Address: Address: City-St-Zip: MIAMI, FL 33180 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: MADERA, NESTOR Address: Address: 6484 S.W. 152ND CIR. PL City-St-Zip: City-St-Zip: MIAMI, FL 33193

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: PATRICIA ROJAS PD 02/06/2009