

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17481

FILED
Jan 09, 2007
Secretary of State

Entity Name: WINDJAMMER CONDOMINIUM OWNER'S ASSOCIATION INC.

Current Principal Place of Business:

7780 A1A SOUTH
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

3942 A1A SOUTH
ST. AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 59-2949379 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLIGOOD, JUDY S
3942 A1A SOUTH
ST. AUGUSTINE, FL 32080 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: D () Delete
Name: TROTMAN, ROY
Address: 1405 HIGH STREET
City-St-Zip: PALATKA, FL 32177

Title: S () Delete
Name: BARNES, MARGARET
Address: 7780 A1A SOUTH UNIT 310
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D () Delete
Name: BRANSFORD, CELORA
Address: 1982 MUNCIE AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: P () Delete
Name: SCHLEISSING, GORDON
Address: 4203 TAHNEE COURT
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: BEESE, LIBBY
Address: 1093 A1A BEAD BLVD, PMB 374
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: T () Delete
Name: SAPP, JUDY
Address: 5737 MASTERS BLVD
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: HENDELES, LESLIE
Address: 3549 NW 30TH BLVD.
City-St-Zip: GAINESVILLE, FL 32605

Title: P (X) Change () Addition
Name: SCHLEISSING, GORDON
Address: 7780 A1A SOUTH, #308
City-St-Zip: ST. AUGUSTINE, FL 32080

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

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: JUDY ALLIGOOD

Electronic Signature of Signing Officer or Director

MGR

01/09/2007

Date