

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 27, 2004  
Secretary of State**

DOCUMENT# N44960

Entity Name: WINDWARD CAY COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 32779 US

**New Principal Place of Business:**

**Current Mailing Address:**

2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 32779 US

**New Mailing Address:**

FEI Number: 59-3085569      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HART, JAMES W JR  
SENTRY MANAGEMENT, INC  
2180 W SR 434, SUITE 5000  
LONGWOOD, FL 21779 US

**Name and Address of New Registered Agent:**

HART, JAMES W JR  
SENTRY MANAGEMENT, INC  
2180 W SR 434, SUITE 5000  
LONGWOOD, FL 21779 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: JAMES W HART JR      04/27/2004  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: COLEMAN, GEORGE  
Address: 122 VERBENA DR  
City-St-Zip: ORLANDO, FL 32807

Title: PD ( ) Delete  
Name: CAMARA, CASEMIRO  
Address: 4709 ALEXIS DR  
City-St-Zip: KISSIMMEE, FL 34746

Title: STD ( ) Delete  
Name: POLLARD, DOUGLAS  
Address: 4756 WINDWARD DR  
City-St-Zip: KISSIMMEE, FL 34746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition  
Name: COLEMAN, GEORGE  
Address: 122 VERBENA DR  
City-St-Zip: ORLANDO, FL 32807

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 Section 119.07(3)(i), 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: CASEMIRO CAMARA      PD      04/27/2004  
Electronic Signature of Signing Officer or Director      Date