

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005910

FILED  
Mar 12, 2010  
Secretary of State

**Entity Name:** ABILITIES AT WINDJAMMER, INC.

**Current Principal Place of Business:**

2735 WHITNEY ROAD  
CLEARWATER, FL 33760 US

**New Principal Place of Business:**

**Current Mailing Address:**

2735 WHITNEY ROAD  
CLEARWATER, FL 33760 US

**New Mailing Address:**

**FEI Number:** 59-3352353

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS, GENE  
2735 WHITNEY ROAD  
CLEARWATER, FL 33760 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: PD  
Name: SANDONATO, WILLIAM JR  
Address: 2735 WHITNEY RD  
City-St-Zip: CLEARWATER, FL 33760

Title: VD  
Name: KREISLE, LORI  
Address: 5300 10TH AVE N  
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: ST  
Name: NEVILLE, MIKE  
Address: 2735 WHITNEY RD  
City-St-Zip: CLEARWATER, FL 33760

Title: D  
Name: KLENKE, GUY  
Address: 2735 WHITNEY RD  
City-St-Zip: CLEARWATER, FL 33760

Title: D  
Name: URBAN, THOMAS  
Address: 2735 WHITNEY RD  
City-St-Zip: CLEARWATER, FL 33760

I hereby 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 all other like empowered.

SIGNATURE: GENE THOMAS

D

03/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date