

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004643

1. Entity Name

CROSSWINDS HANGAR CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90120 049 ****61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
21 BEECH BLVD DAYTONA BCH FL 32124 US	21 BEECH BLVD DAYTONA BCH FL 32124-6738 US

2. Principal Place of Business	3. Mailing Address
100 Cessna Blvd. Suite, Apt. #, etc. Suite A	100 Cessna Blvd Suite, Apt. #, etc. Suite A
City & State Daytona Beach, FL	City & State Daytona Beach

4. FEI Number	Applied For
59-3437633	Not Applicable

Zip	Country	Zip	Country
32124	USA	32124	USA

5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
----------------------------------	--------------------------	--------------------------------

6. Name and Address of Current Registered Agent

PALMETTO CHARTER SERVICES, INC.
 150 MAGNOLIA AVENUE
 DAYTONA BEACH FL 32018

7. Name and Address of New Registered Agent

Name: James Smith
 Street Address (P.O. Box Number is Not Acceptable): 100 Cessna Blvd. Suite A
 City: Daytona Beach, FL Zip Code: 32124

8. 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 Smith DATE: 4/13/00

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HARPER, TERRY	
STREET ADDRESS	21 BEECH BLVD	
CITY-ST-ZIP	DAYTONA BCH FL 32124	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	UPCHURCH, PAUL	
STREET ADDRESS	21 BEECH BLVD	
CITY-ST-ZIP	DAYTONA BCH FL 32124	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	OLSON, NANCY L	
STREET ADDRESS	2886 RICKENBACKER TRAIL	
CITY-ST-ZIP	DAYTONA BCH FL 32124	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	James Smith, President/director	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	100 Cessna Blvd.	
STREET ADDRESS	Daytona Beach, FL 32124	
CITY-ST-ZIP		
TITLE	Don Sturm, Vice Pres./Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	100 Cessna Blvd.	
STREET ADDRESS	Daytona Beach, FL 32124	
CITY-ST-ZIP		
TITLE	Jim Atwood, Secretary/Treasurer/Dir.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	100 Cessna Blvd.	
STREET ADDRESS	Daytona Beach, FL 32124	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED DATE: 4-13-00 DAYTIME PHONE #: (904) 760-5884

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/99)