

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 14, 2007 8:00 am**  
**Secretary of State**

03-14-2007 90046 009 \*\*\*\*61.25

**DOCUMENT # 753772**

1. Entity Name

WINDING CREEK CONDOMINIUM CORPORATION



Principal Place of Business

SEABOARD ARBORS MANAGEMENT  
2189 CLEVELAND STREET, STE #225  
CLEARWATER FL 33765

Mailing Address

SEABOARD ARBORS MANAGEMENT  
2189 CLEVELAND STREET, STE #225  
CLEARWATER FL 33765

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2196876

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/06)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEIGHTON, LENNARD A  
SEABOARD ARBORS MANAGEMENT  
2186 CLEVELAND ST, STE #225  
CLEARWATER FL 33765

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME FITZGERALD, MIKE  
STREET ADDRESS 2400 WINDING CREEK BLVD. #14-106  
CITY-ST-ZIP CLEARWATER FL 33761

TITLE VD ☒ Delete  
NAME RUBAJ, OLEH  
STREET ADDRESS 2400 WINDING CRK BLVD, # 26-204  
CITY-ST-ZIP CLEARWATER FL 33761

TITLE D ☐ Delete  
NAME ALEXANDER, LARRY  
STREET ADDRESS 2400 WINDING CRK BLVD, # 18B-202  
CITY-ST-ZIP CLEARWATER FL 33761

TITLE SD ☒ Delete  
NAME HAYDEN, LARRY  
STREET ADDRESS 2400 WINDING CRK BLVD, # 9-101  
CITY-ST-ZIP CLEARWATER FL 33761

TITLE TD ☐ Delete  
NAME FINCHAM, JOAN  
STREET ADDRESS 2400 WINDING CRK BLVD, # 13-104  
CITY-ST-ZIP CLEARWATER FL 33761

TITLE D ☐ Delete  
NAME NICHOLS, HARRY  
STREET ADDRESS 2400 WINDING CRK BLVD, # 2-104  
CITY-ST-ZIP CLEARWATER FL 33761

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TD ☐ Change ☒ Addition  
NAME BRYANT, MIKE  
STREET ADDRESS 2400 WINDING CREEK BLVD. #9-104  
CITY-ST-ZIP CLEARWATER, FL 33761

SD ☒ Change ☐ Addition  
NAME ALEXANDER, LARRY  
STREET ADDRESS 2400 WINDING CREEK BLVD.  
CITY-ST-ZIP #18B-202  
CLEARWATER, FL 33761

☐ Change ☐ Addition

VPD ☒ Change ☐ Addition  
NAME FINCHAM, JOAN  
STREET ADDRESS 2400 WINDING CREEK BLVD.  
CITY-ST-ZIP #13-104  
CLEARWATER, FL 33761

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 another like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/1/07