2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N98000007085

1. Entity Name

THE POOLS AT WINDWARD PASSAGE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

213 WINDWARD PASSAGE CLEARWATER, FL 33767

Mailing Address

213 WINDWARD PASSAGE CLEARWATER, FL 33767

FILED Apr 10, 2008 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

CR2E037 (4/06) 04082008 No Chg-NP

Applied For 4. FEI Number 59-3594786 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

7274490809

6. Name and Address of Current Registered Agent

GAYNOR, JOSEPH W 219 WINDWARD PASSAGE CLEARWATER, FL 33767

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

DO NOT WRITE IN THIS SPACE

| 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 | | | | | | |
| | Filing Fee Is \$61.25 Due by May 1, 2008 9. Election Campaign Finant Trust Fund Contribution. | | cing | \$5.00 May Be Added to Fees | 04/23/08 ² 80905-002 61.25 | |
| 10. | OFFICERS AND D | IRECTORS | - | | , | |
| 1ITLE NAME STREET ADDRESS CITY-ST-ZIP | PD MEEK, JOHN 213 WINDWARD PASSAGE CLEARWATER, FL 33767 | | | | • | ÷ |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD FLINT, NELSON 229 WINDWARD PASSAGE CLEARWATER, FL 33767 | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD BROCK, BRUCE 211 WINDWARD PASSAGE CLEARWATER, FL 33767 | | | DO | NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD HERSHMAN, CAROLE 221 WINDWARD PASSAGE CLEARWATER, FL 33767 | | | IN | THIS SPACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | ** ** |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | · · · · · · · · · · · · · · · · · · · | | | |
| 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 fighting 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 charged, or on an attachment with an address, with all other like empowered. | | | | | | |