2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733574

Entity Name: WEST WIND ESTATES CONDOMINIUM ASSOCIATION, INC.

FILED Apr 10, 2014 Secretary of State CC4757180313

Current Principal Place of Business:

301 JOSEPH LANE NAPLES, FL 34114

Current Mailing Address:

RESORT MANAGEMENT 815 BALD EAGLE DR., SUITE 201 MARCO ISLAND, FL 34145 US

FEI Number: 59-1647091 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A. 4001 TAMIAMI TRAIL NORTH, SUITE 410 NAPLES, FL 34103 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title T Title VP

Name BROUWER, SUSIE Name ALSTADT, LYNN

Address 201 OCEAN REEF LANE Address 1918 FRANKLIN PLACE

City-State-Zip: NAPLES FL 34114 City-State-Zip: MAIN TOWNSHIP PA 15108

Title PRESIDENT Title SECRETARY
Name ALL, JERRY Name DOUGAN, JAMES

Address 291 LIME KEY LANE Address P.O. BOX 545

City-State-Zip: NAPLES FL 34114 City-State-Zip: GOODLAND FL 34140

Title DIRECTOR Title DIRECTOR

NameCONTE, DOUGLASNameCHERBO, AUGUSTINEAddress251 INDIAN KEY LANEAddress280 ISLAMORADA LANE

City-State-Zip: NAPLES FL 34114 City-State-Zip: NAPLES FL 34114

Title DIRECTOR

Name SHUDES, ROGER
Address 290 LIME KEY LANE
City-State-Zip: NAPLES FL 34114

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: SUSIE BROUWER

Electronic Signature of Signing Officer/Director Detail

TREAS 04/10/2014

Date