

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733574

Entity Name: WEST WIND ESTATES CONDOMINIUM ASSOCIATION, INC.

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.
ATTN: GREGORY MARLER
999 VANDERBILT BEACH RD. SUITE 501
NAPLES, FL 34108 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
Name BROUWER, SUSIE
Address 201 OCEAN REEF LANE
City-State-Zip: NAPLES FL 34114

Title VP
Name SCHOLZ, RICHARD
Address 271 INDIAN KEY LANE
City-State-Zip: NAPLES FL 34114

Title PRESIDENT
Name ALL, JERRY
Address 291 LIME KEY LANE
City-State-Zip: NAPLES FL 34114

Title SECRETARY
Name PALMER, KEEN
Address 151 OCEAN REEF LANE
City-State-Zip: NAPLES FL 34114

Title DIRECTOR
Name CONTE, DOUGLAS
Address 251 INDIAN KEY LANE
City-State-Zip: NAPLES FL 34114

Title D
Name ALSTADT, LYNN
Address 1918 FRANKLIN PLACE
City-State-Zip: MAIN TOWNSHIP PA 15108

Title DIRECTOR
Name GOODRICH, RICHARD
Address 290 OCEAN REEF 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

TREASURER

03/26/2013

Electronic Signature of Signing Officer/Director Detail

Date