2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733574

Entity Name: WEST WIND ESTATES CONDOMINIUM ASSOCIATION, INC.

FILED Apr 17, 2019 **Secretary of State** 5862176361CC

Current Principal Place of Business:

2335 TAMIAMI TRAIL N

#402

NAPLES, FL 34103

Current Mailing Address:

2335 TAMIAMI TRAIL N

#402

NAPLES, FL 34103 US

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

Name and Address of Current Registered Agent:

CAMBRIDGE MANAGEMENT OF SWFL 2335 TAMIAMI TRAIL N #402

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: JAMES FARESE 04/17/2019

> Date Electronic Signature of Registered Agent

> > City-State-Zip:

NAPLES FL 34103

Officer/Director Detail:

Title **PRESIDENT** Title DIRECTOR

YOUNG, LARRY Name Name GENDERSON, KEN

2335 TAMIAMI TRAIL N Address Address 2335 TAMIAMI TRAIL N #402

#402

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title **SECRETARY** Title **TREASURER**

Name ORTALDO, JOHN Name KITTRELL, JOAN

Address 2335 TAMIAMI TRAIL N Address 2335 TAMIAMI TRAIL N #402 #402

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title DIRECTOR Title DIRECTOR

WECKELMAN, JENNIE WREDE, RYLAND Name Name

2335 TAMIAMI TRAIL N 2335 TAMIAMI TRAIL N Address Address #402

#402

Title VΡ

City-State-Zip:

Name GRAY, TOM

Address 2335 TAMIAMI TRAIL N

NAPLES FL 34103

#402

NAPLES FL 34103 City-State-Zip:

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.

04/17/2019 SIGNATURE: LARRY YOUNG **PRESIDENT**