

**2016 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:**GUARDIAN PROPERTY MGMT  
6704 LONE OAK BLVD  
NAPLES, FL 34109 US**FEI Number:** 59-1647091**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUARDIAN PROPERTY MANAGEMENT  
GUARDIAN PROPERTY MGMT  
6704 LONE OAK BLVD  
NAPLES, FL 34109 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:** BYRON LEE ROSS

03/01/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ALSTADT, LYNN  
Address        290 ISLAMORADA LN  
City-State-Zip: NAPLES FL 34114

Title            VICE PRESIDENT  
Name            YOUNG, LARRY  
Address        191 GRASSY KEY LN  
City-State-Zip: NAPLES FL 34114

Title            SECRETARY  
Name            ORTALDO, JOHN  
Address        210 ISLAMORADA LN  
City-State-Zip: NAPLES FL 34114

Title            TREASURER  
Name            KITTRELL, JOAN  
Address        291 GRASSY KEY LN  
City-State-Zip: NAPLES FL 34114

Title            DIRECTOR  
Name            CHAMPAGNE, JOE  
Address        281 OCEAN REEF LN  
City-State-Zip: NAPLES FL 34114

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

Title            DIRECTOR  
Name            HACKETT, BARBARA  
Address        281 SUGAR LOAF LN  
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:** LYNN ALSTADT

PRESIDENT

03/01/2016

Electronic Signature of Signing Officer/Director Detail

Date