

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 744821

**Entity Name:** THE SOUTHWIND CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5499 S. ATLANTIC AVE.  
#100  
NEW SMYRNA BEACH, FL 32169

**Current Mailing Address:**

5499 S. ATLANTIC AVE.  
#100  
NEW SMYRNA BEACH, FL 32169

**FEI Number:** 59-1954748

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MARSHBURN, JAMES  
445 KNOLL TREE LANE  
APOPKA, FL 32712 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 MARSHBURN

03/07/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MARSHBURN, JAMES  
Address        445 KNOLL TREE LANE  
City-State-Zip: APOPKA FL 32712

Title            SECRETARY  
Name            MCLAUGHLIN, CHARLES  
Address        161 EASTON CIRCLE  
City-State-Zip: OVEIDO FL 32765

Title            TREASURER  
Name            ROONEY, PATRICIA  
Address        5499 S. ATLANTIC AVE.  
                  #1103  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title            VP  
Name            COSTELLO, PETER  
Address        1755 COCOPLUM COURT  
City-State-Zip: LONGWOOD FL 32779

*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:** PATRICIA ROONEY

**MANAGER**

03/07/2019

Electronic Signature of Signing Officer/Director Detail

Date