## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 764842** 

Entity Name: WESTWINDS PROFESSIONAL PLAZA ASSOCIATION, INC.

FILED Feb 19, 2014 Secretary of State CC4644243706

## **Current Principal Place of Business:**

4900 MANATEE AVENUE W STE 206 BRADENTON. FL 34209

**Current Mailing Address:** 

4900 MANATEE AVE W STE 206 BRADENTON, FL 34209 US

FEI Number: 59-2245317 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SOBEL, EDWARD B C/O EDWARD B SOBEL PA 4900 MANATEE AVE W., SUITE 206 BRADENTON, FL 34209 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 PD Title D

NameSOBEL, EDWARDNameNEUNSCHWANDER, RICHARDAddress4900 MANATEE AVENUE, STE 206Address4900 MANATEE AVENUE, STE 101

City-State-Zip: BRADENTON FL 34209 City-State-Zip: BRADENTON FL 34209

Title DIRECTOR Title TD

Name SOBEL, DONNA Name LOURIE, JOHN

Address 4900 MANATEE AVENUE, STE 206 Address 4900 MANATEE AVE W., STE 201

City-State-Zip: BRADENTON FL 34209 City-State-Zip: BRADENTON FL 34209

Title SECRETARY, DIRECTOR

Name XANTOS, YVONNE

Address 4900 MANATEE AVE W

SUITE 103

City-State-Zip: BRADENTON FL 34209

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: EDWARD B SOBEL

**PRESIDENT** 

02/19/2014