

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 765273

**FILED  
Mar 20, 2015  
Secretary of State  
CC7748187852**

**Entity Name:** FAIRWIND SHORES CONDOMINIUM ASSOC., INC.

**Current Principal Place of Business:**

3360 OCEAN SHORE BLVD.  
ORMOND BEACH, FL 32176

**Current Mailing Address:**

3360 OCEAN SHORE BLVD.  
ORMOND BEACH, FL 32176 US

**FEI Number:** 59-2297509

**Certificate of Status Desired:** No

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

FAIRWIND SHORES CONDO ASSOC.  
3360 OCEAN SHORE BLVD  
ORMOND BEACH, FL 32176 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 P  
Name HENDRIX, RICHARD  
Address 3370 OCEAN SHORE BLVD  
106B  
City-State-Zip: ORMOND BEACH FL 32776

Title VP  
Name GRACON, LARRY  
Address 3370 OCEAN SHORE BLVD.  
204B  
City-State-Zip: ORMOND BEACH FL 32176

Title T  
Name COLLINS, JIM  
Address 3370 OCEAN SHORE BLVD.  
206B  
City-State-Zip: ORMOND BEACH FL 32176

Title S  
Name SHARPEE, ANITA  
Address 3360 OCEAN SHORE BLVD  
507A  
City-State-Zip: ORMOND BEACH FL 32176

Title D  
Name WILTSEE, SYLVIA  
Address 3370 OCEAN SHORE BLVD.  
505B  
City-State-Zip: ORMOND BEACH FL 32176

*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:** RICHARD HENDRIX

**PRESIDENT**

**03/20/2015**

Electronic Signature of Signing Officer/Director Detail

Date