

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767169

Entity Name: LEEWARD CONDOMINIUM OWNERS ASSOCIATION, INC.

FILED
Feb 08, 2016
Secretary of State
CC2021554344

Current Principal Place of Business:

% JEANETTE MCCAY
3605 WESTCHESTER CIRCLE
BIRMINGHAM, AL 35223

Current Mailing Address:

% JEANETTE MCCAY
3605 WESTCHESTER CIRCLE
BIRMINGHAM, AL 35223

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ERVIN, MARK
281 THORNBERG DRIVE
TALLAHASSEE, FL 32312 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: MARK ERVIN

02/08/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title T
Name MCCAY, JEANETTE
Address 3605 WESTCHESTER CIR
City-State-Zip: BIRMINGHAM AL 35223

Title D
Name MCCAY, WENDY
Address 3605 WESTCHESTER CIR
City-State-Zip: BIRMINGHAM AL 35223

Title VP
Name COUSINEAU, KAREN
Address P O BOX 2796
City-State-Zip: COLUMBIA FALLS MT 59912

Title DIRECTOR
Name UZAR, TIM
Address 12 BRIGHTLING LANE
City-State-Zip: NEWMAN GA 30265

Title DIRECTOR
Name BISHOP, TRACY
Address 3613 WESTCHESTER CIRCLE
City-State-Zip: BIRMINGHAM, AL 35223

Title SECRETARY
Name TURNER, MELISSA
Address 281 THORNBERG DRIVE
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name MCCAY, LYNN
Address 2471 OLD ROCKEY RIDGE ROAD
City-State-Zip: BIRMINGHAM AL 35216

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: JEANETTE MCCAY

TREASURER

02/08/2016

Electronic Signature of Signing Officer/Director Detail

Date