

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004780

Entity Name: WINDING STREAM RECREATION ASSOCIATION, INC.

FILED
Mar 12, 2018
Secretary of State
CC7745786205

Current Principal Place of Business:

1035 COLLIER CENTER WAY
SUITE 7
NAPLES, FL 34110

Current Mailing Address:

1035 COLLIER CENTER WAY
SUITE 7
NAPLES, FL 34110

FEI Number: 65-1153914

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMPSON, SUSAN L
1035 COLLIER CENTER WAY
7
NAPLES, FL 34110 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 DIRECTOR
Name JACQUEL , TOM
Address 9241 SPRING RUN BLVD. #2201
City-State-Zip: BONITA SPRINGS FL 34135

Title SECRETARY
Name STANDRING, CHRISTINE
Address 9331 SPRING RUN BLVD.
City-State-Zip: BONITA SPRINGS FL 34135

Title PRESIDENT
Name HAMILTON, CHRISTINE
Address 9231 SPRING RUN BLVD
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name BRYAN, GEORGE
Address 9281 SPRING RUN BLVD
City-State-Zip: BONITA SPRINGS FL 34135

Title TREASURER
Name DUSSUALT, RICHARD
Address 9351 SPRING RUN BLVD
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name HARLA, KEN
Address SPRING RUN BLVD
City-State-Zip: BONITA SPRINGS FL 34135

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: CHRISTINE HAMILTON

PRESIDENT

03/12/2018

Electronic Signature of Signing Officer/Director Detail

Date