

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001989

Entity Name: COASTAL WINDS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

801 N. RIVERSIDE DRIVE
POMPANO BEACH, FL 33062

Current Mailing Address:

801 N. RIVERSIDE DRIVE
7 B
POMPANO BEACH, FL 33062 US

FEI Number: 27-2254380

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOWDALL TAX SERVICE
1701 E ATLANTIC BLVD
SUITE 4
POMPANO BEACH, FL 33060 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: DONNA DOWDALL

01/16/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ELECK, IDA
Address 801 N. RIVERSIDE DRIVE
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name OLIVIER, NORMA
Address 801 N. RIVERSIDE DRIVE
City-State-Zip: POMPANO BEACH FL 33062

Title T
Name BRESLIN, MARY LOU
Address 801 N. RIVERSIDE DRIVE
City-State-Zip: POMPANO BEACH FL 33062

Title PRESIDENT
Name AMADEO, SAL
Address 801 N. RIVERSIDE DRIVE
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name DOYON, JEAN-CHARLES
Address 1485 CH MOULTON HILL
City-State-Zip: SHERBROOKE QUEBEC, CANADA
JIG5E4

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: MARY LOU BRESLIN

TREASURER

01/16/2017

Electronic Signature of Signing Officer/Director Detail

Date