

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17481

**Entity Name:** WINDJAMMER CONDOMINIUM OWNER'S ASSOCIATION INC.

**FILED**  
**Apr 15, 2021**  
**Secretary of State**  
**7642983477CC**

**Current Principal Place of Business:**

7780 A1A SOUTH  
ST. AUGUSTINE, FL 32080

**Current Mailing Address:**

3942 A1A SOUTH  
ST. AUGUSTINE, FL 32080

**FEI Number: 59-2949379**

**Certificate of Status Desired: No**

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

ALLIGOOD, JUDY SMS  
3942 A1A SOUTH  
ST. AUGUSTINE, FL 32080 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           NICHOLS, DENISE MS  
Address        7780 A1S SOUTH, #106  
City-State-Zip: ST. AUGUSTINE FL 32080

Title           TREASURER  
Name           OLENICK, MATTHEW MR  
Address        412 SIERRAS LOOP  
City-State-Zip: SAINT AUGUSTINE FL 32086

Title           PRESIDENT  
Name           MARETT, RICHARD MR  
Address        2375 BLAKE BLVD. SE  
City-State-Zip: CEDAR RAPIDS IA 52403

Title           DIRECTOR  
Name           WARMINGTON, JOHN MR  
Address        7780 A1A SOUTH, #301  
City-State-Zip: ST. AUGUSTINE FL 32080

Title           VP  
Name           BEESE, LIBBY MS  
Address        11 CROSSLEAF COURT WEST  
City-State-Zip: PALM COAST FL 32137

Title           DIRECTOR  
Name           CORBETT, GREGORY MR  
Address        5058 HUNTERS GREEN  
City-State-Zip: TOLEDO OH 43623

Title           SECRETARY  
Name           TINGLE, TERESA  
Address        1934 DURAND MILL DRIVE  
City-State-Zip: ATLANTA GA 30307

Title           MANAGER  
Name           ALLIGOOD, JUDY  
Address        3942 A1A SOUTH  
City-State-Zip: ST. AUGUSTINE FL 32080

*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: JUDY ALLIGOOD**

**MANAGER**

**04/15/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date