

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17481

Entity Name: WINDJAMMER CONDOMINIUM OWNER'S ASSOCIATION INC.**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	BARNES, MARGARET MS
Address	7780 A1A SOUTH, # 310
City-State-Zip:	SAINT AUGUSTINE FL 32080

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

Title	VP
Name	HENDELES, LESLIE MR
Address	3549 NW 30TH BLVD.
City-State-Zip:	GAINESVILLE FL 32605

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

Title	DIRECTOR
Name	JONES, CHRIS MR
Address	411 LOYD ROAD
City-State-Zip:	PEACHTREE CITY GA 30269

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

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 MARETT**PRESIDENT****01/09/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date