

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004643

Entity Name: CROSSWINDS HANGAR CONDOMINIUM ASSOCIATION, INC.

FILED
Jan 07, 2020
Secretary of State
4735793288CC

Current Principal Place of Business:

391 S. TIMBERLANE DRIVE
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

391 S. TIMBERLANE DRIVE
NEW SMYRNA BEACH, FL 32168 US

FEI Number: 59-3437633

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAUMANN, KARLA
391 S. TIMBERLANE DRIVE
NEW SMYRNA BEACH, FL 32168 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 PRESIDENT
Name GOFF, ROBERT
Address 391 S. TIMBERLANE DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title VICE PRESIDENT
Name FEHLHABER, WOLFGANG
Address 391 S. TIMBERLANE DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title TREASURER
Name AUSTEN, PETE
Address 391 S. TIMBERLANE DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title DIRECTOR
Name TELLING, FRED
Address 391 S. TIMBERLANE DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title DIRECTOR
Name BEERS, CURTIS
Address 391 S. TIMBERLANE DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title SECRETARY
Name BAUMANN, KARLA
Address 391 S. TIMBERLANE DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32168

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: KARLA BAUMANN

SECRETARY

01/07/2020

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date