2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# 719992

Entity Name: WINDMILL VILLAGE BY THE SEA RECREATION CENTER ASSOCIATION, INC.

Current Principal Place of Business:

10850 S. OCEAN DR.
#170
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

10851 S. OCEAN DR.
#170
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 59-2391406 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRALEY, ROBERT G
10851 S OCEAN DRIVE
#50
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: STRALEY, ROBERT G
Address: 10851 S OCEAN DR #50
City-St-Zip: JENSEN BEACH, FL 34957

Title: VPD ( ) Delete
Name: BRANN, ROBERT
Address: 107 AQUA RA DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete
Name: GRANT, DAVID
Address: 10851 S OCEAN DR #3
City-St-Zip: JENSEN BEACH, FL 34957

Title: STD (X) Delete
Name: COOPER, JUDIE
Address: 72 AQUA RA DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: D (X) Delete
Name: GUITARD, ANNETTE
Address: 10851 S OCEAN DR #5
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: STRALEY, ROBERT G
Address: 10851 S OCEAN DR #50
City-St-Zip: JENSEN BEACH, FL 34957

Title: PD (X) Change ( ) Addition
Name: WILKINSON, DON
Address: 10851 S OCEAN DRIVE #112
City-St-Zip: JENSEN BEACH, FL 34957

Title: STD (X) Change ( ) Addition
Name: BLANCHARD, ED
Address: 10851 S OCEAN DR #54
City-St-Zip: JENSEN BEACH, FL 34957

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BOB STRALEY VP 02/23/2009

Electronic Signature of Signing Officer or Director — Date