2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2005 8:00 am
Secretary of State
02-09-2005 90033 043 ****61.25

DOCUMENT # 722422

1. Entity Name
WINDMILL VILLAGE CIVIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4000 NORTH TUTTLE AVE. SARASOTA, FL 34234	4000 NORTH TUTTLE AVE. SARASOTA, FL 34234

01132005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1911034 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ELCHORN, GARY 4215 EDAM ST SARASOTA, FL 34234	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RYAN, JOHN 3715 EDAM ST SARASOTA, FL 34234	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ROBERT HARPER 4402 PITTENGER DR SARASOTA FL 34234	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD EWING, COLIN 3815 EDAM ST SARASOTA, FL 34234	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P COLIN EWING 3815 EDAM ST SARASOTA FL 34234	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CARLSON, ROY 4015 VOORNE DR SARASOTA, FL 34234	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GARY EICHORN 4215 EDAM ST SARASOTA FL 34234	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MCBRIDE, NORMA 3640 ACHEN ST SARASOTA, FL 34234	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUSSELL MORSE 4211 RHINE ST SARASOTA, FL, 34234	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SAVAGE, ELLIE 2902 FREEMAN ST SARASOTA, FL 34234	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOEY, FRANK 3918 VOORNE ST SARASOTA, FL 34234	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Colin Ewing COLIN EWING 04 FEB 2005 941-359-3689
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #