2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 724586

1. Entity Name
THE WINDWARD II, INC.

Principal Place of Business	Mailing Address
1250 N E 125TH STREET N MIAMI, FL 33161 US	1250 N E 125TH STREET N MIAMI, FL 33161 US

DO NOT WRITE IN THIS SPACE

01302006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-1602356
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PADILLA, ENRIDUE D
1250 NE 125TH ST #301
N MIAMI, FL 33161

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

Filing Fee is $61.25
Due by May 1, 2006

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

000000420303
02/15/06-80050-001 75.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MOTRON, SAMUEL
STREET ADDRESS	1250 NE 125TH ST #200
CITY-ST-ZIP	N MIAMI, FL 33161
TITLE	VPD
NAME	BOHEMBLEY, CECIL
STREET ADDRESS	1250 NE 125TH ST #318
CITY-ST-ZIP	N MIAMI, FL 33161
TITLE	TD
NAME	PADILLA, ENRIQUE D
STREET ADDRESS	1250 N.E. 125TH ST #301
CITY-ST-ZIP	N MIAMI, FL 33161
TITLE	D
NAME	ARANDA, PAULINA
STREET ADDRESS	1250 NE 125TH ST., #202
CITY-ST-ZIP	N. MIAMI, FL 33161
TITLE	SD
NAME	CLEMENTE, ESPERANZA
STREET ADDRESS	1250 NE 125TH ST #311
CITY-ST-ZIP	N. MIAMI, FL 33161
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ January - 31 - 2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
(305) 893-0102