

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725174

FILED
Feb 12, 2009
Secretary of State

Entity Name: WINDJAMMER ASSOCIATION INC

Current Principal Place of Business:

12 WINDJAMMER PT
MERRITT ISLAND, FL 32952

New Principal Place of Business:

8 WINDJAMMER PT
MERRITT ISLAND, FL 32952

Current Mailing Address:

12 WINDJAMMER PT
MERRITT ISLAND, FL 32952

New Mailing Address:

8 WINDJAMMER PT
MERRITT ISLAND, FL 32952

FEI Number: 59-1511535

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHER, BOBBIE
12 WINDJAMMER PT
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

LINNETT, CHRISTINE K
8 WINDJAMMER PT
MERRITT ISLAND, FL 32952 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: CHRISTINE LINNETT

02/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FISHER, BOBBIE D
Address: 12 WINDJAMMER PT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TD () Delete
Name: FISHER, GLENDA E
Address: 12 WINDJAMMER PT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: SD () Delete
Name: GLENDA, FISHER E
Address: 12 WINDJAMMER PL
City-St-Zip: MERRITT ISLAND, FL 32952

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALEXANDER, CATHERINE
Address: 15 WINDJAMMER PT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TD (X) Change () Addition
Name: LINNETT, CHRISTINE K
Address: 8 WINDJAMMER PT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: SD (X) Change () Addition
Name: LINNETT, CHRISTINE K
Address: 8 WINDJAMMER PT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VD () Change (X) Addition
Name: GIBBONS, HUGH
Address: 17 WINDJAMMER PT
City-St-Zip: MERRITT ISLAND, FL 32952

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: CHRISTINE LINNETT

TD

02/12/2009

Electronic Signature of Signing Officer or Director

Date