

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90059 032 ****61.25

DOCUMENT # 727395

1. Entity Name
**WINDMILL VILLAGE BY THE SEA HOMEOWNERS
ASSOCIATION NO. 1, INC.**



Principal Place of Business
**106 AQUA RA DRIVE
JENSEN BEACH, FL 34957**

Mailing Address
**106 AQUA RA DRIVE
JENSEN BEACH, FL 34957**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03292005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
23-7390915

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**COUTURE, CAROLE A
56 AQUA RA DRIVE
JENSEN BCH, FL 34957**

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

Carol A. Couture

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/28/05

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 ☐ Delete
NAME **S**
STREET ADDRESS **WANSOR, LEE**
CITY-ST-ZIP **15188 W TRANQUILITY LAKE DR.
DELRAY BEACH, FL 33446**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **COOPER, JUDITH**
CITY-ST-ZIP **72 AQUA RA DR.
JENSEN BEACH, FL 34957**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME **P**
STREET ADDRESS **COOPER, JUDITH**
CITY-ST-ZIP **72 AQUA RA DR.
JENSEN BEACH, FL 34957**

TITLE ☐ Change ☒ Addition
NAME **P**
STREET ADDRESS **Josh Perrotta**
CITY-ST-ZIP **90 Aqua Ra Drive
Jensen Beach, FL 34957**

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **LEMBO, GEORGE**
CITY-ST-ZIP **80 AQUA RA DR.
JENSEN BEACH, FL 34957**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **RAGAN, ROD**
CITY-ST-ZIP **82 AQUA RA DRIVE
JENSEN BEACH, FL**

TITLE ☐ Change ☒ Addition
NAME **D**
STREET ADDRESS **Rick Pittman**
CITY-ST-ZIP **36 Aqua Ra Dr.
Jensen Bch, FL 34957**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 in an attachment with an address, with all other like empowered.

SIGNATURE:

Judie Cooper **JUDIE COOPER TREASURER** *3/29/05 561-622-3090*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #