

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737407

FILED
Jan 13, 2011
Secretary of State

Entity Name: WINDRUSH COVE, INC.

Current Principal Place of Business:

ONE WINDRUSH BLVD
INDIAN ROCKS BEACH, FL 33785 US

New Principal Place of Business:

Current Mailing Address:

11350 66TH ST N, SUITE 134
LARGO, FL 33773

New Mailing Address:

FEI Number: 59-1928880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BABCOCK, ROBERT A
11350 66 ST N #124
LARGO, FL 33773 US

Name and Address of New Registered Agent:

HOLIDAY ISLES PROPERTY MGMT.
11350 66 ST N #124
LARGO, FL 33773 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: ROBERT A. BABCOCK

01/13/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: DREW, TOM
Address: 1 WINDRUSH BLVD. #48
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: SD
Name: LINGENFELTER, BILL
Address: 1 WINDRUSH BLVD. #7
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: VPD
Name: THORPE, BARBARA
Address: 1 WINDRUSH BLVD. #18
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: TD
Name: BOB, EASTMAN
Address: 1 WINDRUSH COVE #81
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: D
Name: JOHN, SOULOUTIS
Address: 1 WINDRUSH COVE #71
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

I hereby 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 all other like empowered.

SIGNATURE: TOM DREW

PD

01/13/2011

Electronic Signature of Signing Officer or Director

Date