2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# 740162

Entity Name: CORAL WINDS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2930 DEL PRADO BLVD, S
SUITE B
CAPE CORAL, FL 33904

New Principal Place of Business:

3618 NE 18TH PL.
CAPE CORAL, FL 33909

Current Mailing Address:

2930 DEL PRADO BLVD, S
#B
CAPE CORAL, FL 33904

New Mailing Address:

3618 NE 18TH PL.
CAPE CORAL, FL 33909

FEI Number: 65-0979031 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SORENSON, CATHY
2930 DEL PRADO BLVD, S
SUITE B
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

MORALES, CARMEN N
3618 NE 18TH PL
CAPE CORAL, FL 33909 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: CARMEN N. MORALES 04/18/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: STD ( ) Delete
Name: CONNOR, MARLENE
Address: 1011 SE 40 STREET # B
City-St-Zip: CAPE CORAL, FL 33904

Title: VPD ( ) Delete
Name: CONLEY, ROBERT
Address: 1011 SE 40 STREET #A
City-St-Zip: CAPE CORAL, FL 33904

Title: PD ( ) Delete
Name: KALINOSKI, JAMES
Address: 1011 SE 40 ST., #C
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: CARMEN N. MORALES MGR 04/18/2008
Electronic Signature of Signing Officer or Director — Date