2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741259

FILED Mar 31, 2011 Secretary of State

Entity Name: WINDING WOOD CONDOMINIUM VIII ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

CONTINENTAL

2870 SCHERER DRIVE STE 100

SAINT PETERSBURG, FL 33716 US

THE CONTINENTAL GROUP, INC.

2870 SCHERER DRIVE NO, STE 100

SAINT PETERSBURG, FL 33716 US

Current Mailing Address: New Mailing Address:

CONTINENTAL

2870 SCHERER DRIVE STE 100

SAINT PETERSBURG, FL 33716 US

THE CONTINENTAL GROUP, INC.

2870 SCHERER DRIVE NO, STE 100

SAINT PETERSBURG, FL 33716 US

FEI Number: 59-1810110 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CIANFRONE, JOSEPH R 1968 BAYSHORE BLVD DUNEDIN, FL 34698 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES

Name: SABLESKI, RICHARD

Address: 2870 SCHERER DRIVE NO, SUITE 100 City-St-Zip: ST. PETERSBURG, FL 33716

Title: SEC

Name: ROSSEY, SUSAN

Address: 2870 SCHERER DRIVE NO, SUITE 100

City-St-Zip: ST. PETERSBURG, FL 33716

Title: DIR

Name: SHORT, VICKI

Address: 2870 SCHERER DRIVE NO, SUITE 100 City-St-Zip: ST. PETERSBURG, FL 33716

Title: TRES

Name: MYRON, RICK

Address: 2870 SCHERER DRIVE NO, SUITE 100

City-St-Zip: ST. PETERSBURG, FL 33716

Title: VP

Name: ILLICH, GEORGE

Address: 2870 SCHERER DRIVE NO, SUITE 100

City-St-Zip: ST. PETERSBURG, FL 33716

Title: TRES

Name: BROWN, RICHARD

Address: 2870 SCHERER DRIVE NO, SUITE 100 City-St-Zip: ST. PETERSBURG, FL 33716

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: BRIAN JONES LCAM 03/31/2011