

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742584

FILED
Apr 09, 2007
Secretary of State

Entity Name: WINDWARD VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1351 CHESAPEAKE AVE.
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

F. K. AXLEY, ST
UNIT D, 1351 CHESAPEAKE AVENUE
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 65-0098960 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AXLEY, FRANCES K S/T
1351 CHESAPEAKE AVENUE
UNIT D
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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: P () Delete
Name: KOOP, RICHARD
Address: 1351 CHESAPEAKE AVENUE, UNIT C
City-St-Zip: NAPLES, FL 34102 US

Title: VP () Delete
Name: JALBERT, JOHN
Address: PO BOX 74
City-St-Zip: METHUEN, MA 018440074 US

Title: ST () Delete
Name: AXLEY, FRANCES K
Address: 1351 CHESAPEAKE AVENUE, UNIT D
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TIMMINS, CRAIG D MR.
Address: 76 CARIBBEAN RD
City-St-Zip: NAPLES, FL 34108 US

Title: VP (X) Change () Addition
Name: JALBERT, JOHN MR.
Address: PO BOX 74
City-St-Zip: METHUEN, MA 018440074 US

Title: ST (X) Change () Addition
Name: AXLEY, FRANCES K MS.
Address: 1351 CHESAPEAKE AVENUE, UNIT D
City-St-Zip: NAPLES, FL 34102

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANCES K. AXLEY

S/T

04/09/2007

Electronic Signature of Signing Officer or Director

Date