


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90140 012 ****61.25

DOCUMENT # 742808		
1. Entity Name WINDSOR F CONDOMINIUM ASSOCIATION, INC.		
Principal Place of Business C/O KAREN VOLAT 132 WINDSOR F WEST PALM BCH FL 33417 US		Mailing Address C/O KAREN VOLAT 132 WINDSOR F WEST PALM BCH FL 33417 US
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address SEACREST SERVICES, INC. 2400 CENTRE PARK W. DRIVE #175 WEST PALM BEACH, FL 33409
6. Name and Address of Current Registered Agent MESCHES, LARRY M P.A. 222 LAKEVIEW AVE., STE 260 WEST PALM BEACH FL 33401		7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 NAME STREET ADDRESS CITY-ST-ZIP	PD VOLAT, KAREN L <input type="checkbox"/> Delete 132 WINDSOR F WEST PALM BEACH FL 33417	TITLE NAME STREET ADDRESS CITY-ST-ZIP PD Karen L. Volat 132 Windsor f West Palm Beach, fl. 33417 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SCAROZZA, LOUIS <input type="checkbox"/> Delete 129 WINDSOR F WEST PALM BEACH FL 33417	TITLE NAME STREET ADDRESS CITY-ST-ZIP VPD Donald McNicholas 123 Windsor f West Palm Beach fl. 33417 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BJORNLAND, ROGER <input type="checkbox"/> Delete 130 WINDSOR F WEST PALM BEACH FL 33417	TITLE NAME STREET ADDRESS CITY-ST-ZIP TD Bjornland, Rogin 130 Windsor f West Palm Beach, fl. 33417 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD AUSBROOK, A. ELEANOR <input type="checkbox"/> Delete 124 WINDSOR F WEST PALM BEACH FL 33417	TITLE NAME STREET ADDRESS CITY-ST-ZIP SD Alan C. Volat 132 Windsor f West Palm Beach, fl. 33417 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MCKENNA, BRIDGET <input type="checkbox"/> Delete 121 WINDSOR F WEST PALM BEACH FL 33417	TITLE NAME STREET ADDRESS CITY-ST-ZIP D Louis SCAROZZA 129 Windsor f W.P.B., fl. 33417 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VOLAT, ALAN <input type="checkbox"/> Delete 132 WINDSOR F WEST PALM BEACH FL 33417	TITLE NAME STREET ADDRESS CITY-ST-ZIP Lush, TMA 122 Windsor f W.P.B., fl. 33417 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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 on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>Karen L. Volat</i> KAREN L. VOLAT - President 3-28-05 561-697-2674 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		