FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Bloc

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 23 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

746475

(3)

WINDSWEPT CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business		Mailing Address	Mailing Address			BINI BYBNI BINYI BINI	i afali el	0)A 01014 1001
2203 N SURF RD HOLLYWOOD FL 33019		C/O E. FRAZEE P.O. BOX 22-3882 HOLLYWOOD FL 33022-3882						
					3. Date Incorporated or Qualified 03/27/1979	3a. Date of 03/	Last Re 18/199	
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number NOT APPLICABLE	BLE Applied For Not Applicable		
Suite, Apt. #, etc		Suite, Apt. #, etc.	<u>├</u>		5. Certificate of Status Desired	TVF	8.75 A	Additional
City & State		City & State		6. Election Campaign Financing			May Be	
23		28		Trust Fund Contribution		Added t		
Zip 24	Country 25	Zip 29	Country 30		This corporation has liability for Florida Statutes	intangible tax u		199.032,
[9. Name and Address of Current Registered Agent		30 1		10. Name and Address of New Re			
			81	Name				,
	, edward G. Prth Surf Road		82	82 Street Address (P.O. Box Number is Not Acceptable)				
HOLLYWOOD FL 33019			83				,	
			84	City	1100	FJ 85	Zip (Code
11. Pursuant to the previsions of Sections 617,0502 and 617,1508, Florida Statutes, the office or registered agent or both, in the State of Florida. Such change was author				the corpor	proporation submits this statement for the pration's board of directors. I hereby acce	ourpose of cha-	nging it nent as	s registered registered
agent Familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered as	pers and tile if applicable (NOTE	Registered Age	nt signature rec	quired when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI			
TITLE	PD DELETE		1.1 TITLE				Change	Addition
NAME	FRAZEE, EDWARD G.		1.2 NAME					
STREET ADDRESS	2203 N SURF ROAD		1.3 STREET ADDRE					
CITY - SI - ZIP	HOLLYWOOD FL 33019 PD DELETE		1.4 CITY-ST-ZIP				Change	Addition
TITLE	PD DELETE BEDWELL, ELSIE		2 1 TITLE			U'	Juanye	Addition
NAME OTOGET ADDRESS	2205 N. SURF RD.		2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS	HOLLYWOOD FL		2.4 CHTY-ST-ZIP					
CHTY - ST - ZIP TITLE	VD DELETE		3.1 TITLE	SI-ZIP			Change	Addition
NAME	FIZZANO, GUY		3.2 NAME	1			,,, <u></u>	
STREET ADDRESS	2201 N. SURF. RD.		3.3 STREET	ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL		3.4. CITY-5					
TITLE	SD	DELETE	4,1 TITLE	,, -£"	7111111		Change	Addition
NAME	BURKE, DORIS B		4. 2 NAME]			-	
STREET ADDRESS	165 S.W. 125TH AVENUE		4.3 STREET	ADDRESS				
CITY-ST-7IP	PLANTATION FL 33325		4.4 CITY - S	1				
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			53 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY - S					
TITLE			6.1 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				

14. I do 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 annual report or supplemental annual 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