

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746755

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Entity Name:** FORT WALTON BEACH GULF WINDS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

307 BARRACUDA AVENUE  
FORT WALTON BEACH, FL 32548 US

**New Principal Place of Business:**

**Current Mailing Address:**

836 TROPIC AVE  
FORT WALTON BEACH, FL 32548 US

**New Mailing Address:**

P.O. BOX 4583  
FORT WALTON BEACH, FL 32549 US

**FEI Number:** 59-2384021

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COZZI, DONA M ST  
326 SAILFISH CIR  
DESTIN, FL 32541 US

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

MONTALTO, SHERIE  
423 CAVIAR DRIVE  
FORT WALTON BEACH, FL 32548 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: SHERIE MONTALTO

04/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MONTALTO, SHERIE  
Address: 423 CAVIAR DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32548 US

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: SHERIE MONTALTO

P

04/05/2011

Electronic Signature of Signing Officer or Director

Date