

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750632

FILED
Mar 27, 2009
Secretary of State

Entity Name: EAST WIND OF VERO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ELLIOTT MERRILL
835 20TH PL.
VERO BEACH, FL 32960 US

New Principal Place of Business:

910 E. CAUSEWAY BLVD
VERO BEACH, FL 32963 US

Current Mailing Address:

C/O ELLIOTT MERRILL
835 20TH PL.
VERO BEACH, FL 32960 US

New Mailing Address:

FEI Number: 59-1983355 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCKINNON, CHARLES
3055 CARDINAL DR STE 302
VERO BEACH, FL 32963 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: SD () Delete
Name: SCOFIELD, ROBERT
Address: 910 E. CAUSEWAY BLVD. #B07
City-St-Zip: VERO BEACH, FL 32963

Title: TD () Delete
Name: FERRARI, RUTH
Address: 2424 CHOSLESTON AVE.
City-St-Zip: VESTAL, NY 13850

Title: P () Delete
Name: GASZ, GERALD
Address: 910 EAST CAUSEWAY BLVD B06
City-St-Zip: VERO BEACH, FL 32963

Title: VP () Delete
Name: MADDEN, RICHARD
Address: 910 E CAUSEWAY BLVD C13
City-St-Zip: VERO BEACH, FL 32963

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: SCOFIELD, ROBERT
Address: 910 E. CAUSEWAY BLVD. #B07
City-St-Zip: VERO BEACH, FL 32963

Title: D (X) Change () Addition
Name: FERRARI, RUTH
Address: 2424 CHOSLESTON AVE.
City-St-Zip: VESTAL, NY 13850

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: JOHN, CROWE T
Address: 910 E. CAUSEWAY BLVD #A1
City-St-Zip: VERO BEACH, FL 32963

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT SCOFIELD

T

03/27/2009

Electronic Signature of Signing Officer or Director

Date