

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753772

FILED  
Mar 12, 2010  
Secretary of State

**Entity Name:** WINDING CREEK CONDOMINIUM CORPORATION

**Current Principal Place of Business:**

SEABOARD ARBORS MANAGEMENT  
2189 CLEVELAND STREET, STE #225  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

SEABOARD ARBORS MANAGEMENT  
2189 CLEVELAND STREET, STE #225  
CLEARWATER, FL 33765

**New Mailing Address:**

**FEI Number:** 59-2196876

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEIGHTON, LENNARD A  
SEABOARD ARBORS MANAGEMENT  
2186 CLEVELAND ST, STE #225  
CLEARWATER, FL 33765 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  
Name: FITZGERALD, MIKE  
Address: 2400 WINDING CREEK BLVD. #14-106  
City-St-Zip: CLEARWATER, FL 33761

Title: PD  
Name: COSTACHE, LEE  
Address: 2400 WINDING CREEK BLVD #2-203  
City-St-Zip: CLEARWATER, FL 33761

Title: D  
Name: HANSELL, BEVERLY  
Address: 2400 WINDING CREEK BLVD #18B-105  
City-St-Zip: CLEARWATER, FL 33761

Title: TD  
Name: HADDAD, LORNE  
Address: 2400 WINDING CREEK BLVD #13-102  
City-St-Zip: CLEARWATER, FL 33761

Title: D  
Name: HAYDEN, LARRY  
Address: 2400 WINDING CREEK BVLD #9-101  
City-St-Zip: CLEARWATER, FL 33761

Title: VPD  
Name: RUBAJ, OLEH  
Address: 2400 WINDING CREEK BLVD #26-204  
City-St-Zip: CLEARWATER, FL 33761

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: LEE COSTACHE

PD

03/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date