

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90049 003 ****61.25

DOCUMENT # 754599

1. Entity Name

**WINDWARD POINT CONDOMINIUM ASSOCIATION AT BAY
BEACH, INC.**



Principal Place of Business

400 LENELL ROAD
OFFICE
FT. MYERS BCH. FL 33931

Mailing Address

400 LENELL ROAD
OFFICE
FT. MYERS BCH. FL 33931

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0262260

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

LESTER, JOY
400 LENELL ROAD UNIT 508
FT MYERS BCH FL 33931

7. Name and Address of New Registered Agent

Name Tom Sammut
Street Address (P.O. Box Number is Not Acceptable)
400 Lenell Road
City Fort Myers Beach FL Zip Code 33931

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when changing)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE 2VP ☐ Delete
NAME SAMMUT, TOM
STREET ADDRESS 1251 OAK AVE
CITY-ST-ZIP WEST ISLIP NY 11795

TITLE P ☒ Delete
NAME LESTER, JOY
STREET ADDRESS 400 LENELL RD., UNIT 104
CITY-ST-ZIP FORT MYERS BEACH FL 33931

TITLE VPD ☐ Delete
NAME VACCARI, ANTHONY
STREET ADDRESS 85-96 SANTIAGO ST
CITY-ST-ZIP HOLLISWOOD NY 11423

TITLE S ☐ Delete
NAME ZYCH, KAY
STREET ADDRESS 38056 VILLA MAR
CITY-ST-ZIP HARRISON TOWNSHIP MI 48045

TITLE T ☐ Delete
NAME CAVANAUGH, ROBERT
STREET ADDRESS 103 GH BAKER DR
CITY-ST-ZIP URBANA IL 61801

TITLE Gary Minnis ☐ Delete
NAME Gary Minnis
STREET ADDRESS 10766 Creekstone Ct
CITY-ST-ZIP Centerville, OH 45458

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Vice Pres ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Sec. ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Tom Sammut

4-14-07