

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756036

FILED
Feb 27, 2009
Secretary of State

Entity Name: FAIRWINDS COVE RECREATION ASSOCIATION, INC.

Current Principal Place of Business:

3422 NE CAUSEWAY BLVD.
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

1111 SE FEDERAL HIGHWAY
STE 100
STUART, FL 34994 US

New Mailing Address:

FEI Number: 59-2086319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNETT, JANE L ESQ
401 E. OSCEOLA ST.
STUART, FL 34994 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: D () Delete
Name: REID, MICHAEL
Address: 3382 NE CAUSEWAY BLVD 7-204
City-St-Zip: JENSEN BEACH, FL 34957

Title: VPD () Delete
Name: RIVERBARK, CARL
Address: 3432 NE CAUSEWAY BLVD #4-103
City-St-Zip: JENSEN BEACH, FL 34957

Title: PD () Delete
Name: WINSHIP, KENT
Address: 3482 NWE CAUSEWAY BLVD #2-303
City-St-Zip: JENSEN BEACH, FL 34957

Title: TD () Delete
Name: ANDRESS, RODNEY
Address: 34232 NE CAUSEWAY BLVD #4-404
City-St-Zip: JENSEN BEACH, FL 34957

Title: SD () Delete
Name: DALY, JOAN
Address: 3382 NE CAUSEWAY BLVD. #7-203
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCARBROUGH, DEBBIE
Address: 3492 NE CAUSEWAY BLVD. #1-401
City-St-Zip: JENSEN BEACH, FL 34957

Title: VPD (X) Change () Addition
Name: JONES, WILLIAM
Address: 3412 NE CAUSEWAY BLVD. #16-404
City-St-Zip: JENSEN BEACH, FL 34957

Title: TD (X) Change () Addition
Name: WINSHIP, KENT
Address: 3482 NWE CAUSEWAY BLVD. #2-303
City-St-Zip: JENSEN BEACH, FL 34957

Title: PD (X) Change () Addition
Name: ANDRESS, RODNEY
Address: 34232 NE CAUSEWAY BLVD. #4-404
City-St-Zip: JENSEN BEACH, FL 34957

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

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: RODNEY ANDRESS

PRES

02/27/2009

Electronic Signature of Signing Officer or Director

Date