

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # 757646

1. Entity Name
**THE WINDJAMMER CONDOMINIUM ASSOCIATION OF
LAUDERDALE-BY-THE SEA, FLORIDA, INC.**



Principal Place of Business
**4244 EL MAR DR
LAUDERDALE BY THE SEA, FL 33308-2497**

Mailing Address
**4244 EL MAR DR
LAUDERDALE BY THE SEA, FL 33308-2497**



01102007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2172752

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BOUTIN, DIANE Y
4244 EL MAR DRIVE
LAUDERDALE BY THE SEA FL, FL 33308**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$81.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PDC
SCHWEIGHARDT, RONALD
4244 EL MAR DRIVE
LAUDERDALE BY THE SEA, FL 33308**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ASD
WATSON, MICHELLE
4244 EL MAR DRIVE
LAUDERDALE BY THE SEA, FL 33308**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
BOUTIN, ROLLANDE D.
4244 EL MAR DRIVE
LAUDERDALE BY THE SEA, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
INGALLS, NANCY
4244 EL MAR DRIVE
LAUDERDALE BY THE SEA, FL 33308**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BOUTIN, DIANE B
4244 EL MAR DRIVE
LAUDERDALE BY THE SEA, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
STOFSKY, ANGELA
4244 EL MAR DR.
FORT LAUDERDALE, FL 333085497**

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01/17/07-80083-001 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Diane Y. Boutin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/07 9547764232
Date Daytime Phone #