2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# 758443

Entity Name: WINDWARD PASSAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4708-4712 OCEAN BLVD
SARASOTA, FL 34242 US

New Principal Place of Business:

Current Mailing Address:

5160 HEALDEN SPRINGS
SARASOTA, FL 34234 US

New Mailing Address:

4708 OCEAN BLVD
SARASOTA, FL 34242 US

FEI Number: 59-2281584 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NICOLL, MAC
4712 OCEAN BLVD
SARASOTA, FL 34242 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: HURLEY, VALERIE
Address: 4708 OCEAN BLVD, #E-8
City-St-Zip: SARASOTA, FL 34242

Title: TD ( ) Delete
Name: NICOLL, MAC
Address: 4712 OCEAN BLVD
City-St-Zip: SARASOTA, FL 34242

Title: VD ( ) Delete
Name: APPLETON, LOUISE
Address: 4708 OCEAN BLVD
City-St-Zip: SARASOTA, FL 34242

Title: D ( ) Delete
Name: KOVAL, EUGENE
Address: 4712 OCEAN BLVD
City-St-Zip: SARASOTA, FL 34242

Title: PD ( ) Delete
Name: LEGRANDE, JEAN
Address: 4708 OCEAN BLVD, #E-10
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change ( ) Addition
Name: PATTERSON, ART
Address: 4708 OCEAN BLVD
City-St-Zip: SARASOTA, FL 34242

Title: VD (X) Change ( ) Addition
Name: BIER, GREG
Address: 4712 OCEAN BLVD
City-St-Zip: SARASOTA, FL 34242

Title: PD (X) Change ( ) Addition
Name: LEGRAND, JEAN
Address: 4708 OCEAN BLVD, #E-10
City-St-Zip: SARASOTA, FL 34242

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: MAC NICOLL TD 05/01/2007

Electronic Signature of Signing Officer or Director — Date