

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759617

FILED
Jan 24, 2008
Secretary of State

Entity Name: SOUTHWIND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10151 SINTON DRIVE
PENSACOLA, FL 32507

New Principal Place of Business:

Current Mailing Address:

10151 SINTON DRIVE
PENSACOLA, FL 32507

New Mailing Address:

FEI Number: 59-2144615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILK, BRIAN
10151 SINTON DR.
PENSACOLA, FL 32507 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: PD () Delete
Name: GARTH, WINSTON
Address: 10135 SINTON DR.
City-St-Zip: PENSACOLA, FL 32507

Title: VPD () Delete
Name: BERKES, JAMES
Address: 10109 SINTON DR.
City-St-Zip: PENSACOLA, FL 32507

Title: SEC () Delete
Name: SILK, BRIAN
Address: 10151 SINTON DR.
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: BRIAN A. SILK

SEC

01/24/2008

Electronic Signature of Signing Officer or Director

Date