

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760978

FILED
Mar 27, 2009
Secretary of State

Entity Name: SOUTHWINDS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1215 SOUTHAMPTON DRIVE
PORT ORANGE, FL 32119

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 290413
S DAYTONA, FL 32119

New Mailing Address:

FEI Number: 59-2722002

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER, LYNN C
SOUTHEAS MGMT SRVS.
3511 S PENINSULA DR
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

BECKER, LYNN C
SOUTHEAST MGMT. SERVICES
3280 S. ATLANTIC AVE. SUITE A
DAYTONA SHORES, FL 32118 US

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: LYNN C. BECKER/ MANAGER

03/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JAMISON, BARRY
Address: 1118 SOUTHWINDS DR
City-St-Zip: PORT ORANGE, FL 32129

Title: TD () Delete
Name: RUNDALL, JEFF
Address: 1102 SOUTHLAND COURT
City-St-Zip: PORT ORANGE, FL 32129

Title: T (X) Delete
Name: INGLAY, DENNIS R
Address: 1117-2 SOUTHWINDS DR
City-St-Zip: PORT ORANGE, FL 32129

Title: S () Delete
Name: MARING, BRUCE
Address: 1104 A SOUTH MEADOW DR
City-St-Zip: PORT ORANGE, FL 32129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: RUNDALL, JEFF
Address: 1102 SOUTHLAND COURT
City-St-Zip: PORT ORANGE, FL 32129

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

Title: ST (X) Change () Addition
Name: MARING, BRUCE
Address: 1104 A SOUTH MEADOW DR
City-St-Zip: PORT ORANGE, FL 32129

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: LYNN C. BECKER

MGR.

03/27/2009

Electronic Signature of Signing Officer or Director

Date