

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761892

FILED
Apr 16, 2012
Secretary of State

Entity Name: WINDWARD PASSAGE RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

418 ESTERO BLVD.
FT. MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 540669
MERRITT ISLAND, FL 32954

New Mailing Address:

FEI Number: 59-2356585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRICE, ROBERT
271 CROCKETT BLVD
MERRITT ISLAND, FL 32953 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
Name: COUSINEAU, CHRIS
Address: 418 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VPD
Name: TONEY, ROBERT
Address: 418 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: STD
Name: MITCHELL, DON
Address: 418 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D
Name: WOLFE, RAY
Address: 418 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D
Name: CRANE, BRUCE
Address: 418 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

I hereby 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 all other like empowered.

SIGNATURE: DON MITCHELL

STD

04/16/2012

Electronic Signature of Signing Officer or Director

Date