

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762200

FILED
Mar 20, 2009
Secretary of State

Entity Name: CROSSWINDS OF DELRAY ASSOCIATION, INC.

Current Principal Place of Business:

500 NE SPANISH RIVER BLVD
STE 18
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

500 N.E. SPANISH RIVER BLVD
#18
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 59-2191838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIS, ERNEST W.
500 N.E. SPANISH RIVER BLVD
18
BOCA RATON, FL 33431 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: VD () Delete
Name: SANE, DEAN
Address: 1850 HOMEWOOD BLVD.
City-St-Zip: DELRAY BCH, FL 33445

Title: T () Delete
Name: GOLDSCHMIDT, KURT
Address: 2790 AZALEA CRT
City-St-Zip: DELRAY BCH, FL 33445

Title: PD () Delete
Name: MANLER, CURT
Address: 1850 HOMEWOOD BLVD
City-St-Zip: DELRAY BEACH, FL 33445

Title: V () Delete
Name: RICHARDS, SHARON
Address: 2070 HOMEWOOD BLVD., #201
City-St-Zip: DELRAY BEACH, FL 33445

Title: SD () Delete
Name: CLARK, CHRIS
Address: 2774 BEGONIA COURT
City-St-Zip: DELRAY BEACH, FL 33445

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANE, DEAN
Address: 1850 HOMEWOOD BLVD. 113
City-St-Zip: DELRAY BCH, FL 33445

Title: TD (X) Change () Addition
Name: GOLDSCHMIDT, KURT
Address: 2790 AZALEA CRT #90
City-St-Zip: DELRAY BCH, FL 33445

Title: SD (X) Change () Addition
Name: CLARK, CHRIS
Address: 2774 BEGONIA CT
City-St-Zip: DELRAY BEACH, FL 33445

Title: D (X) Change () Addition
Name: RICHARDS, SHARON
Address: 2070 HOMEWOOD BLVD., #201
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP (X) Change () Addition
Name: DAVIDSON, OLIE
Address: 2789 DRACAENA CT
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP () Change (X) Addition
Name: HASKIN, JIM
Address: 1850 HOMEWARD BLVD 517
City-St-Zip: DELRAY BCH, FL 33445

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: DEAN SANE

P

03/20/2009

Electronic Signature of Signing Officer or Director

Date