

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766803

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Entity Name:** WINDWARD BAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2189 CLEVELAND ST  
SUITE 225  
CLEARWATER, FL 33765 US

**New Principal Place of Business:**

**Current Mailing Address:**

2189 CLEVELAND ST  
SUITE 225  
CLEARWATER, FL 33765 US

**New Mailing Address:**

**FEI Number:** 59-2375162

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEIGHTON, LENNARD A  
2189 CLEVELAND ST  
SUITE 225  
CLEARWATER, FL 33765 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: D  
Name: CHESSER, CHRYSTAL  
Address: 324 WINDRUSH BLVD. #11  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: PD  
Name: GOLLY, ALEX  
Address: 17745 GULF BLVD. #504  
City-St-Zip: REDDINGTON BEACH, FL 33708

Title: TD  
Name: GOLLY, LINDA  
Address: 17745 GOLF BLVD. #504  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: VD  
Name: REYES, ROLAND  
Address: 3901 W DALE AVE  
City-St-Zip: TAMPA, FL 33609

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: ALEX GOLLY

PD

02/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date