

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90011 047 ****61.25

DOCUMENT # 767169	
1. Entity Name LEEWARD CONDOMINIUM OWNERS ASSOCIATION, INC.	

Principal Place of Business % JEANETTE MCCAY BIRMINGHAM, AL 35223	Mailing Address 3605 WESTCHESTER CIR BIRMINGHAM, AL 35223
---	---

DO NOT WRITE IN THIS SPACE



01122007 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FORRESTER, A.J.
ROUTE 2, BOX 3460
PT. WASHINGTON, FL 32459

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Jeanette McCay - Jeanette McCay - Treasury/Sec. DATE 4/19/07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$81.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	TS MCCAY, JEANETTE 3605 WESTCHESTER CIR BIRMINGHAM, AL 35223
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>VP</u> FORRESTER, ALICE ROUTE 2, BOX 3460 PT. WASHINGTON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HACKER, CHARLES 49 ALDEN AVE. ATLANTA, GA 30309
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HENDRIX, THOMAS 303 CASELTON WAY MARIETTA, GA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MCCAY, JOE 3605 WESTCHESTER CIR. BIRMINGHAM, AL 35223
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jeanette McCay DATE 4/19/07 DAYTIME PHONE # 205-999-2040

JEANETTE MCCAY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR