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Mar 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 768645 (4)

1. Corporation Name
WESTWINDS VILLAGE, INC.



Principal Place of Business 5316 53RD AVE. E. BRADENTON FL 34203	Mailing Address 5316 53RD AVE. E. BRADENTON FL 34203
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3. Date Incorporated or Qualified 05/25/1983
4. FEI Number 65-0101676
Applied For <input type="checkbox"/>
Not Applicable <input checked="" type="checkbox"/>

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

DOMBER, HARLAN R
2801 FRUITVILLE RD
SUITE 150
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME VAN STEENHOUSE, ROBERT	
STREET ADDRESS 5316 53RD AVENUE E STE. L-2	
CITY-ST-ZIP BRADENTON FL	
TITLE VD	<input checked="" type="checkbox"/> DELETE
NAME BORSVOLD, DONALD	
STREET ADDRESS 5316 53RD. AVE. E. M-8	
CITY-ST-ZIP BRADENTON FL	
TITLE PD	<input type="checkbox"/> DELETE
NAME SHUBERT, HAROLD	
STREET ADDRESS 5316 53 AVE E N08	
CITY-ST-ZIP BRADENTON FL	
TITLE TD	<input type="checkbox"/> DELETE
NAME RICHARDS, ROY	
STREET ADDRESS 5316 53RD AVENUE E SUITE A-46	
CITY-ST-ZIP BRADENTON FL	
TITLE D	<input type="checkbox"/> DELETE
NAME MEEK, ROBERT	
STREET ADDRESS 5316 53 AVE E J-15	
CITY-ST-ZIP BRADENTON FL	
TITLE SD	<input type="checkbox"/> DELETE
NAME CRANSON, LEONE	
STREET ADDRESS 5316 53RD. AVE. E. N-7	
CITY-ST-ZIP BRADENTON FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME Boerema, Doris J.	
1.3 STREET ADDRESS 5316 53rd. Ave. E. Q-2	
1.4 CITY-ST-ZIP Bradenton, FL 34203	
2.1 TITLE VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME Pike, Donald	
2.3 STREET ADDRESS 5316 53rd. Ave. E. L-5	
2.4 CITY-ST-ZIP Bradenton, FL 34203	
3.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME Sauer, Margaret	
3.3 STREET ADDRESS 5316 53rd. Ave. E. F-28	
3.4 CITY-ST-ZIP Bradenton, FL 34203	
4.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME Schlemann, James	
4.3 STREET ADDRESS 5316 53rd. Ave. E. J-3	
4.4 CITY-ST-ZIP Bradenton, FL 34203	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Doris J. Boerema* **Doris Boerema, President 3/17/98 941 756-7411**

CP2E037 (10/97)