

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Apr 23, 2009  
Secretary of State**

DOCUMENT# 768645

Entity Name: WESTWINDS VILLAGE, INC.

**Current Principal Place of Business:**5316 53RD AVE. E.  
BRADENTON, FL 34203**New Principal Place of Business:****Current Mailing Address:**5316 53RD AVE. E.  
BRADENTON, FL 34203**New Mailing Address:**

FEI Number: 65-0101676

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**DOMBER, HARLAN R  
3900 CLARK ROAD  
SUITE L-1  
SARASOTA, FL 34233 US**Name and Address of New Registered Agent:**GORDON, SCOTT E  
ONE SARASOTA TOWER  
TWO NORTH TAMAMI TRAIL FIFTH FLOOR  
SARASOTA, FL 34236 US

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: SCOTT GORDON

04/23/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PRES ( ) Delete  
Name: SCHAUS, RITA  
Address: 5316 53RD AVE E J-19  
City-St-Zip: BRADENTON, FL 34203Title: V/P ( ) Delete  
Name: ROBERTS, LES  
Address: 5316 53RD AVE E C-5  
City-St-Zip: BRADENTON, FL 34203Title: TRES ( ) Delete  
Name: JARRETT, ADRIENNE  
Address: 5316 53RD AVE E. L-2  
City-St-Zip: BRADENTON, FL 34203Title: SEC ( ) Delete  
Name: MOONEY, MIKE  
Address: 5316 53RD AVENUE EAST ZA-1  
City-St-Zip: BRADENTON, FL 34203Title: D ( ) Delete  
Name: COSGROVE, ART  
Address: 5316 53RD AVE E K-2  
City-St-Zip: BRADENTON, FL 34203Title: A/SE ( ) Delete  
Name: DEMOTT, DON  
Address: 5316 53RD AVE E  
City-St-Zip: BRADENTON, FL 34203**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RITA SCHAUS

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

Date