

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769262

FILED
May 02, 2006
Secretary of State

Entity Name: WINDY COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

84750 OVERSEAS HWY
ISLAMORADA, FL 33036 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1040
TAVERNIER, FL 33070 US

New Mailing Address:

P O BOX 7807
AMARILLO, TX 79114 US

FEI Number: 65-0414688 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KNIGHT III, RALPH
84731
UNIT 2
ISLAMORADA, FL 33036 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: DS () Delete
Name: WATTS, MICHAEL
Address: 919 STATE STREET
City-St-Zip: PEATH AMBOY, NJ 08861

Title: T () Delete
Name: VASKO, JOAN E
Address: PO BOX 1040
City-St-Zip: TAVERNIER, FL 33070

Title: DP () Delete
Name: KNIGHT, RALPH III,
Address: PO BOX 1783
City-St-Zip: ISLAMORADA, FL 33036

Title: D () Delete
Name: CULBERTSON, DAN,
Address: 1270 STETLANE DRIVE
City-St-Zip: MILFORD, MI

Title: DVP () Delete
Name: MERRIFIELD, DARRELL
Address: 224 SOUTH MAIN ST
City-St-Zip: ELK CITY, OK

Title: T (X) Delete
Name: VASKO, JOAN E
Address: 91551 OVERSEAS HWY
City-St-Zip: TAVERNIER, FL 33070

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: VASKO, JOAN E
Address: P O BOX 7807
City-St-Zip: AMARILLO, TX 79114 US

Title: DP (X) Change () Addition
Name: KNIGHT, RALPH M III
Address: PO BOX 1783
City-St-Zip: ISLAMORADA, FL 33036

Title: D (X) Change () Addition
Name: CULBERTSON, DAN
Address: 1270 STETLANE DRIVE
City-St-Zip: MILFORD, MI

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 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: JOAN E VASKO

T

05/02/2006

Electronic Signature of Signing Officer or Director

Date