2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# 769262

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:

P O BOX 7807
AMARILLO, TX 79114 US

New Mailing Address:

FEI Number: 65-0414688 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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:	96 SO. MAIN STREET	
City-St-Zip:	MILLTOWN, NJ 08850	
Title:	T	( ) Delete
Name:	VASKO, JOAN E	
Address:	P O BOX 7807	
City-St-Zip:	AMARILLO, TX 79114 US	
Title:	DP	( ) Delete
Name:	KNIGHT, RALPH M III	
Address:	PO BOX 1783	
City-St-Zip:	ISLAMORADA, FL 33036	
Title:	D	( ) Delete
Name:	CULBERTSON, DAN	
Address:	PO BOX 364	
City-St-Zip:	ISLAMORADA, FL 33036	
Title:	DVP	( ) Delete
Name:	MERRRIFIELD, DARRELL	
Address:	224 SOUTH MAIN ST	
City-St-Zip:	ELK CITY, OK	

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:	

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: JOAN E. VASKO T 04/24/2009

Electronic Signature of Signing Officer or Director — Date