

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770537

FILED
Mar 31, 2009
Secretary of State

Entity Name: WINDRUSH BOURNE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2004 LONGMADOW
SARASOTA, FL 34235 US

New Principal Place of Business:

Current Mailing Address:

2004 LONGMADOW
SARASOTA, FL 34235 US

New Mailing Address:

FEI Number: 59-2344292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOKES PROPERTY MANAGEMENT
3053 51ST STREET
SARASOTA, FL 34234 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: PD () Delete
Name: HOLLOWAY, JACK
Address: 3114 WINDRUSH BOURNE
City-St-Zip: SARASOTA, FL 34235

Title: T () Delete
Name: WICKERT, CHARLES
Address: 3101 WINDRUSH BOURNE
City-St-Zip: SARASOTA, FL 34235

Title: D () Delete
Name: SMITH, GEORGE
Address: 3144 WINDRUSH BOURNE
City-St-Zip: SARASOTA, FL 34235

Title: SD () Delete
Name: BRUNK, JOSEPH
Address: 3159 WINDRUSH BOURNE
City-St-Zip: SARASOTA, FL 34235

Title: VPD () Delete
Name: ENGELBAUGH, CHUCK
Address: 3135 WINDRUSH BOURNE
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: SCHUR, BARBARA
Address: 3128 WINDRUSH BOURNE
City-St-Zip: SARASOTA, FL 34235

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

Title: SD (X) Change () Addition
Name: RISTOW, JUDITH
Address: 3132 WINDRUSH BOURNE
City-St-Zip: SARASOTA, FL 34235

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: JACK HOLLOWAY

PD

03/31/2009

Electronic Signature of Signing Officer or Director

Date