


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 25, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 770580</b> 1. Entity Name <b>WESTWIND TOWNHOUSE ASSOCIATION, INC.</b>	
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Principal Place of Business <b>9725 HWY 98W 9 PENSACOLA FL 32506 US</b>	Mailing Address <b>9725 HWY 98W 9 PENSACOLA FL 32506 US</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/05)

4. FEI Number <b>59-3045650</b>	Applied For <input type="checkbox"/> Not Applied
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent <b>POPA, JOHN J 9725 HWY 98 STE 9 PENSACOLA FL 32506</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when certifying)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
PD POPA, JOHN J 9725 HWY 98 W, SUITE 8 PENSACOLA FL	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Add
STD TOWEU, CHARLOTTE 9725 HWY 98 W, SUITE 15 PENSACOLA FL	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Add
VD DUNIGAN, RICHARD 9725 HWY 98 WEST #16 PENSACOLA FL	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Add
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Add
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	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Add

UN00000566019  
05/25/06-80001-002 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John Popa* *John Popa* 5-1606 850-494-1454