

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771267

FILED
Feb 16, 2010
Secretary of State

Entity Name: SOUTHWINDS AT CROSSWINDS CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business:

2070 HOMEWOOD BLVD
BOX 518
DELRAY BEACH, FL 33445 US

New Principal Place of Business:

Current Mailing Address:

2070 HOMEWOOD BLVD
BOX 518
DELRAY BEACH, FL 33445 US

New Mailing Address:

2070 HOMEWOOD BLVD
BOX 518
DELRAY BEACH, FL 33445 US

FEI Number: 59-2699219

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLUP, M.J.
817 GEORGE BUSH BLVD.
DELRAY BEACH, FL 33483 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: P
Name: ALBERTS, CHRISTOPHER
Address: 2070 HOMEWOOD BLVD 506
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: T
Name: DEC, LAURA
Address: 2070 HOMEWOOD BLVD. 313
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: VP
Name: SWIFT, VERA
Address: 2070 HOMEWOOD BLVD 208
City-St-Zip: DELRAY BEACH, FL 33445

Title: S
Name: NAINI, JOAN
Address: 2070 HOMEWOOD BLVD. 206
City-St-Zip: DELRAY BEACH, FL 33445

Title: D
Name: AMES, PATRICIA
Address: 2070 HOMEWOOD BLVD. 306
City-St-Zip: DELRAY BEACH, FL 33445

I hereby 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 all other like empowered.

SIGNATURE: LAURA DEC

T

02/16/2010

Electronic Signature of Signing Officer or Director

Date