
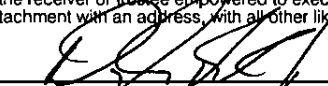


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90748 001 ***428.75

DOCUMENT # N00000001175 1. Entity Name TRADEWINDS POINTE/COQUINA POINTE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 2379 BEVILLE RD. DAYTONA BEACH, FL 32119			Mailing Address 2379 BEVILLE RD. DAYTONA BEACH, FL 32119		
2. Principal Place of Business 2379 Beville Road Suite, Apt. #, etc.		3. Mailing Address 2379 Beville Road Suite, Apt. #, etc.			
City & State Daytona Beach, Florida		City & State Daytona Beach, Florida		4. FEI Number 59-3652226	
Zip 32119		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOSSEINI-KARGAR, MORTEZA 2379 BEVILLE RD. DAYTONA BEACH, FL 32119			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2379 Beville Road City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		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	PD WILFORD, DON <input type="checkbox"/> Delete 3740 ST. JOHN'S BLUFF RD. S., STE. 10 JACKSONVILLE, FL 32224		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROSS, DOUGLAS R JR <input type="checkbox"/> Delete 2379 BEVILLE RD. DAYTONA BEACH, FL 32119		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2379 Beville Road	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MARTINELLO, GENE <input type="checkbox"/> Delete 3740 ST. JOHN'S BLUFF RD. S., STE. 110 JACKSONVILLE, FL 32224		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS <input checked="" type="checkbox"/> Delete THORNTON-HILL, TERESA 2379 BEVILLE ROAD DAYTONA BEACH, FL 32119		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 		Douglas R. Ross, Jr. Vice President		4/26/05 386-788-0820 <small>Date Daytime Phone #</small>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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02222005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3652226 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 2379 Beville Road
 City FL Zip Code

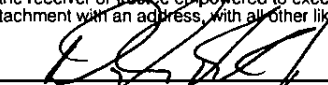
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SIGNATURE:  Douglas R. Ross, Jr.
 Vice President 4/26/05 386-788-0820
Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR