

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2007 8:00 am
Secretary of State

01-26-2007 90032 004 ****61.25

DOCUMENT # N01000003785					
1. Entity Name WESTWINDS II HOMEOWNERS ASSOC., INC.					
Principal Place of Business 3301 ALTERNATE 19 N UNIT 351 DUNEDIN, FL 34698			Mailing Address 3301 ALTERNATE 19 N UNIT 351 DUNEDIN, FL 34698		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SILANO, DELORES 3301 ALTERNATE 19 N UNIT 351 DUNEDIN, FL 34698			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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)					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing <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	P POLAND, RONALD 3301 ALT. 19 N 156 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D SILANO, DELORES 3301 ALT 19 N LOT 351 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RHODES, EUGERTIA 3301 ALT 19 N LL 263 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PETERS, ROBERT 3301 ALT 19 N LOT 258 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TIPTON, LIZ 3301 ALT 19 N LL 263 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LAURIE, IRENE 3301 ALT 19 N LOT 364 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ENGSTROM, CAROL 3301 ALT 19 N LL 257 DUNEDIN, FL 34698	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PETERS, DOROTHY 3301 ALT 19 N LOT 258 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT PETERS, ROBERT 3301 ALT 19 N LL 258 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZAMBELLI, LOLA 3301 ALT 19 N LOT 890 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O RYAN, MARIANNE 3301 ALT 19 N LOT 377 DUNEDIN, FL 34698	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	O RYAN, MARIANNE 3301 ALT 19 N LOT 377 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>DeLore Silano</u> 1/27/07					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

ATTACHMENT

60009373

NO1000003785

WESTWIND II HOMEOWNERS ASSOCIATION INC.

Officers:	President:	Dolores Silano
	Vice President	Robert Peters
	Secretary	Irene Laurie
	Treasurer	Carol Engstrom
	Asst Treasurer	

Directors:	Dorothy Peters
	Lola Zambelli
	Dolores Silano
	Marianne Ryan
	Michael Piedallu

Registered Agent:	Dolores Silano
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