

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01881

FILED  
Apr 18, 2005  
Secretary of State

Entity Name: THE WINDSTAR MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

1700 WINDSTAR BLVD  
NAPLES, FL 34112 US

**New Principal Place of Business:**

**Current Mailing Address:**

1700 WINDSTAR BLVD  
NAPLES, FL 34112 US

**New Mailing Address:**

FEI Number: 65-0071194      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FINK, JOHN C JR.  
1713 YORK ISLAND DRIVE  
NAPLES, FL 34112 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: VPD ( ) Delete  
Name: SOLLECITO, JOHN  
Address: 3554 HALDEMAN CREEK DR., #115  
City-St-Zip: NAPLES, FL 34112

Title: D ( ) Delete  
Name: SIMA, ELAINE  
Address: 4400 LIGHTHOUSE LANE  
City-St-Zip: NAPLES, FL 34112

Title: SD ( ) Delete  
Name: BERETTA, VICTOR  
Address: 3520 HALDEMAN CREEK DR., #102  
City-St-Zip: NAPLES, FL 34112

Title: D ( ) Delete  
Name: HYLAND, WILLIAM  
Address: 4771 YACHT HARBOR DRIVE  
City-St-Zip: NAPLES, FL 34112

Title: PD ( ) Delete  
Name: FINK, JACK  
Address: 1713 YORK ISLAND DR  
City-St-Zip: NAPLES, FL 34112

Title: D ( ) Delete  
Name: HARKINS, JOSEPH  
Address: 2137 PAGET CIRCLE  
City-St-Zip: NAPLES, FL 34112

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: D (X) Change ( ) Addition  
Name: SALERNO, SHERIANN  
Address: 3284 LOOKOUT LANE  
City-St-Zip: NAPLES, FL 34112

Title: PD (X) Change ( ) Addition  
Name: FINK, JOHN C JR  
Address: 1713 YORK ISLAND DR  
City-St-Zip: NAPLES, FL 34112

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN C. FINK, JR.

PD

04/18/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date