2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01881

FILED Apr 30, 2007 Secretary of State

Entity Name: THE WINDSTAR MASTER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1700 WINDSTAR BLVD NAPLES, FL 34112

Current Mailing Address: New Mailing Address:

1700 WINDSTAR BLVD NAPLES, FL 34112

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

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

FINK, JOHN C JR SHERMAN, MICHAEL 1713 YORK ISLAND DRIVE 1724 YORK ISLAND DRIVE NAPLES, FL 34112 NAPLES, FL 34112

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: MICHAEL SHERMAN 04/30/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VPD () Delete (X) Change () Addition LAGRIPPE, JAMES SCOTT, NORMAN, DR. Name: Name: 1450 GULFSTAR DRIVE SOUTH Address: 4994 CHRISTINA COURT Address:

City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112

Title: () Delete Title: (X) Change () Addition SCOTT, NORMAN DR. ROTHENBERG, LESLIE Name: Name:

Address: 4994 CHRISTINA COURT Address: 3861 CLIPPER COVE City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112

Title: () Delete Title: **TREA** (X) Change () Addition BERETTA, VICTOR Name: MELVIN, THOMAS Name:

3520 HALDEMAN CREEK DR., #102 Address: Address: 2101 PAGET CIRCLE City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112

() Delete (X) Change () Addition Title: Title: SOLLECITO, JOHN LAGRIPPE, JIM Name: Name:

3554 HALDEMAN CREEK DRIVE, #115 1450 GULFSTAR DRIVE SOUTH Address: Address:

City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112

Title: () Delete Title: (X) Change () Addition FINK, JOHN C JR SHERMAN, MICHAEL Name: Name: 1713 YORK ISLAND DR 1724 YORK ISLAND DR Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112

Title: () Delete Title: () Change () Addition

VAUGHN, ALI Name: Name: Address: 3812 CLIPPER COVE DRIVE Address: NAPLES, FL 34112 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL SHERMAN **PRES** 04/30/2007

Electronic Signature of Signing Officer or Director

Date