

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003344

**FILED**  
**Mar 12, 2010**  
**Secretary of State**

**Entity Name:** SUMMERWIND WEST CONDOMINIUM OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8573 GULF BLVD  
NAVARRE BEACH, FL 32566 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2613  
FORT WALTON BEACH, FL 32549 US

**New Mailing Address:**

**FEI Number:** 02-0600050

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RDF ASSOCIATES, INC  
29 HWY 98  
SUITE C  
FORT WALTON BEACH, FL 32548 US

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

RDF ASSOCIATES, INC  
29C MIRACLE STRIP PKWY SW  
FORT WALTON BEACH, FL 32548 US

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:**

03/12/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ELLIS, CLAUDE  
**Address:** 20841 HERITAGE TRAIL  
**City-St-Zip:** WALNUT, CA 91789 US

**Title:** V  
**Name:** COX, JAMIE  
**Address:** 1012 JUBILEE WAY  
**City-St-Zip:** POWDER SPRINGS, GA 30127 US

**Title:** T  
**Name:** ADAMS, BARBARA  
**Address:** 705 PINEY WOODS RD  
**City-St-Zip:** VINCENT, AL 35178 US

**Title:** D  
**Name:** PARKER, MICHAEL  
**Address:** 3080 ROCKY BROOK DR  
**City-St-Zip:** ALPHARETTA, GA 30005 US

**Title:** D  
**Name:** OMLEY, GEORGE  
**Address:** 4045 WHISPERING PINES CT  
**City-St-Zip:** SWANEE, GA 30165 US

**Title:** S  
**Name:** LANSDEN, STEPHANIE  
**Address:** 2017 BANE BERRY DR.  
**City-St-Zip:** HOOVER, AL 32544 US

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:** ANDREA MCDERMOTT

MGR

03/12/2010

Electronic Signature of Signing Officer or Director

Date