

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02579

FILED
Mar 10, 2012
Secretary of State

Entity Name: SOUTHWIND CIRCLE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

327 SOUTHWIND DR.
#304
NORTH PALM BCH, FL 33408 US

Current Mailing Address:

327 SOUTHWIND DR.
#304
NORTH PALM BCH, FL 33408 US

FEI Number: 59-2799666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREARSON, ANN
327 SOUTHWIND DR.
#304
N PALM BCH, FL 33408 US

New Principal Place of Business:

327 SOUTHWIND DR.
#303
NORTH PALM BCH, FL 33408 US

New Mailing Address:

327 SOUTHWIND DR.
#303
NORTH PALM BCH, FL 33408 US

Name and Address of New Registered Agent:

ZANELLI, MICHAEL
327 SOUTHWIND DR APT 303
NORTH PALM BEACH, FL 33408 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: MICHAEL ZANELLI

03/10/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ZANELLI, MICHAEL
Address: 327 SOUTHWIND DRIVE UNIT 303
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: V/D
Name: CURRY, DEBRA
Address: 327 SOUTHWIND DRIVE UNIT 306
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: TD
Name: RABBITT, MARILYN
Address: 327 SOUTHWIND DR #104
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: SD
Name: WARD, JANE
Address: 327 SOUTHWIND DR UNIT 208
City-St-Zip: NORTH PALM BEACH, FL 33408

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: MICHAEL ZANELLI

PRES

03/10/2012

Electronic Signature of Signing Officer or Director

Date