

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009643

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** LEEWARD BAY AT TARPON BAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2050 CASTAWAYS COURT  
NAPLES, FL 34119 US

**New Principal Place of Business:**

**Current Mailing Address:**

2050 CASTAWAYS COURT  
NAPLES, FL 34119 US

**New Mailing Address:**

**FEI Number:** 48-1301832

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

IANNONE, ANTHONY E CAM  
2050 CASTAWAYS COURT  
NAPLES, FL 34119 US

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

MCPHEE, DONALD TREAS  
2050 CASTAWAYS COURT  
NAPLES, FL 34119 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: DONALD MCPHEE

04/28/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CALL, HEATHER  
Address: 1907 TARPON BAY DR. N.  
City-St-Zip: NAPLES, FL 34119 US

Title: S ( ) Delete  
Name: BORLAND, ARLENE  
Address: 1988 TARPON BAY DRIVE NORTH  
City-St-Zip: NAPLES, FL 34119 US

Title: TV ( ) Delete  
Name: MCPHEE, DONALD  
Address: 1911 TARPON BAY DR NORTH  
City-St-Zip: NAPLES, FL 34119 US

**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:

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: DONALD MCPHEE

TREA

04/28/2009

Electronic Signature of Signing Officer or Director

Date