2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N03175

Entity Name: WINDWOOD ISLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

778 S MILITARY TRAIL
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

RMC
P.O. BOX 97-0069
BOCA RATON, FL 33497

New Mailing Address:

FEI Number: 59-2615187 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RESIDENTIAL MANAGEMENT CONCEPTS
778 S MILITARY TRAIL
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

PALOMBI, GARY
778 S MILITARY TRAIL
DEERFIELD BEACH, FL 33442 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: GARY PALOMBI 04/23/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: BARON, VICKIE
Address: 130 SE 7TH ST 5-4
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D ( ) Delete
Name: WILKINSON, M.T.
Address: 190 SE 7TH STREET #8
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: P ( ) Delete
Name: BARON, JOHN
Address: 140 SE 7TH STREET 6-8
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: ST ( ) Delete
Name: FERRARO, DAN
Address: 170 SE 7TH ST 3-8
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D ( ) Delete
Name: GOMES, DIREU D
Address: 170 SE 7TH ST 3-4
City-St-Zip: DEERFIELD BEACH, FL 33441

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: ( ) 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: GARY PALOMBI RA 04/23/2009
Electronic Signature of Signing Officer or Director Date