2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# N03530

Entity Name: WIND BREAKER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

753 ATLANTIC BLVD
#1
ATLANTIC BEACH, FL 32233 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 330026
ATLANTIC BEACH, FL 32233 US

New Mailing Address:

FEI Number: 59-2569634 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARVIN & FLOYD REALTY, INC.
753 ATLANTIC BLVD
#1
ATLANTIC BEACH, FL 32233 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: THOMPSON, AMANDA
Address: 1030 N 4TH ST # 1-B
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: TD ( ) Delete
Name: DANNEHOWER, ROBIN
Address: 1028 4TH ST # 2-D
City-St-Zip: JACKSONVILLE, FL 32250

Title: D ( ) Delete
Name: BILODEAU, MICHAEL
Address: 1028 4TH ST # 1-B
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: PD ( ) Delete
Name: THOMPSON, RYLAND
Address: 1028 N 4TH ST
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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:

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: SONIA MARVIN MGR 04/09/2009

Electronic Signature of Signing Officer or Director — Date