## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N05000009798

Jul 07, 2009 Secretary of State

Entity Name: WINDWARD LAKES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** 

4001 W MCNAB ROAD POMPANO BEACH, FL 33069

**Current Mailing Address:** 

4400 N FEDERAL HWY SUITE 408

BOCA RATON, FL 33431

BECKER & POLIAKOFF, P.A.

C/O STUART ZOBERG, ESQ.

3111 STIRLING ROAD

FEI Number: FEI Number Applied For ( )

FEI Number Not Applicable (X)

**New Mailing Address:** 

4001 W MCNAB ROAD

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

ELLISON, STEVEN ESQ C/O BROAD AND CASSEL

POMPANO BEACH, FL 33069

**New Principal Place of Business:** 

C/O THE CONTINENTAL GROUP, INC.

Name and Address of New Registered Agent:

7777 GLADES ROAD - SUITE 300 BOCA RATON, FL 33434 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: STEVEN ELLISON

FORT LAUDERDALE, FL 33312 US

07/07/2009

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

() Delete

KAAN, RONALD Name:

4400 N FEDERAL HWY, SUITE 408 Address:

City-St-Zip: BOCA RATON, FL 33431

Title: SD ( ) Delete

Name: KAAN, VALERIE

Address: 4400 N FEDERAL HWY. SUITE 408

City-St-Zip: BOCA RATON, FL 33431

Title: TSD () Delete MCLAUGHLIN, JOHN Name:

Address: **5 HARGROVE GRADE** City-St-Zip: PALM COAST, FL 32137 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition ALLEN, DAVID S Name:

Address: 40 WILLIAM STREET - SUITE 120

City-St-Zip: WELLESLEY, MA 02481

Title: (X) Change ( ) Addition Name: TAVENNER, THOMAS W JR

Address: 40 WILLIAM STREET - SUITE 120 City-St-Zip: WELLESLEY, MA 02481

Title: (X) Change ( ) Addition Name: COWLES, TIMOTHY J

40 WILLIAM STREET - SUITE 120 Address:

City-St-Zip: WELLESLEY, MA 02481

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: DAVID S. ALLEN Ρ 07/07/2009