

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009856

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** THE RESIDENCES AT WINDWARD PASSAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

24701 US HWY 19 NORTH #102  
CLEARWATER, FL 33763

**New Principal Place of Business:**

24701 US HWY 19 NORTH #102  
CLEARWATER, FL 33763 US

**Current Mailing Address:**

24701 US HWY 19 NORTH #102  
CLEARWATER, FL 33763

**New Mailing Address:**

24701 US HWY 19 NORTH #102  
CLEARWATER, FL 33763 US

**FEI Number:** 20-5575705

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AMERI-TECH REALTY, INC.  
24701 US HWY 19 NORTH #102  
CLEARWATER, FL 33763 US

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

SAWYER, BRIAN  
24701 US HWY 19 NORTH #102  
CLEARWATER, FL 33763 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: BRIAN SAWYER

04/26/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: TADDEO, DEBRA  
Address: 24701 US HIGHWAY 19 N SUITE 102  
City-St-Zip: CLEARWATER, FL 33763

Title: VPD  
Name: NICHOLSON, TOM  
Address: 24701 US HIGHWAY 19 N SUITE 102  
City-St-Zip: CLEARWATER, FL 33763

Title: TD  
Name: FISK, TRINA  
Address: 24701 US HIGHWAY 19 N SUITE 102  
City-St-Zip: CLEARWATER, FL 33763

Title: SD  
Name: MATUSKA, JOHN  
Address: 24701 US HIGHWAY 19 N SUITE 102  
City-St-Zip: CLEARWATER, FL 33763

Title: DIR  
Name: SMARTO, ROSS  
Address: 24701 US HIGHWAY 19 N SUITE 102  
City-St-Zip: CLEARWATER, FL 33763

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: DEBRA TADDEO

PD

04/26/2012

Electronic Signature of Signing Officer or Director

Date