


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90012 025 ****61.25

DOCUMENT # N06028 1. Entity Name WINGFOOT CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1930 COMMERCE LANE, #1 JUPITER, FL 33458			Mailing Address 1930 COMMERCE LANE, #1 JUPITER, FL 33458		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0009120	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
INGLIS, STEVE C/O BRISTOL MANAGEMENT SERVICES 1930 COMMERCE LANE STE #1 JUPITER, FL 33458				Name Street Address (P.O. Box Number is Not Acceptable) City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee Is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	WALDRON, AGNES		NAME		
STREET ADDRESS	1002-B WINGFOOT DRIVE		STREET ADDRESS		
CITY - ST - ZIP	JUPITER, FL 33458		CITY - ST - ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	NEUHAUS, CAROL		NAME	TD CAROL NEUHAUS	
STREET ADDRESS	901-D WINGFOOT DRIVE		STREET ADDRESS	901-D WINGFOOT DR	
CITY - ST - ZIP	JUPITER, FL 33458		CITY - ST - ZIP	JUPITER, FL 33458	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SIMONETTA, VIVIAN		NAME		
STREET ADDRESS	902-D WINGFOOT DRIVE		STREET ADDRESS		
CITY - ST - ZIP	JUPITER, FL 33458		CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change
NAME			NAME	Beverly Greca	
STREET ADDRESS			STREET ADDRESS	301-C WINGFOOT DR	
CITY - ST - ZIP			CITY - ST - ZIP	JUPITER, FL 33458	
TITLE		<input type="checkbox"/> Delete	TITLE	VP	<input type="checkbox"/> Change
NAME			NAME	KAY CARD	
STREET ADDRESS			STREET ADDRESS	402-D WINGFOOT DR	
CITY - ST - ZIP			CITY - ST - ZIP	JUPITER, FL 33458	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Agnes Waldron-Prud'homme</i> 3/7/06					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					