

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12366

FILED
Mar 08, 2010
Secretary of State

Entity Name: THE TRADEWINDS OF VOLUSIA, INC.

Current Principal Place of Business:

5265 S. ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

5265 S. ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 59-2616238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOWELL, WALTER
5255 S ATLANTIC , UNIT 1101
NEW SMYRNA BEACH, FL 32169 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: P/D
Name: STOWELL, WALTER
Address: 5255 S. ATLANTIC, UNIT 1101
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP/S
Name: ALLEN, TERRY
Address: 5275 S ATLANTIC AVE. #705
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP/D
Name: BLACKWOOD, RON
Address: 5275 S. ATLANTIC, UNIT 408
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: T/D
Name: BUTLER, VINCENT G
Address: 1808 WINGFIELD DR.
City-St-Zip: LONGWOOD, FL 32779

Title: D
Name: SIGMAN, DONALD L
Address: 1431 RIVERVIEW PLACE - UNIT #2805
City-St-Zip: JACKSONVILLE, FL 32207

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: TERRY ALLEN

VP/S

03/08/2010

Electronic Signature of Signing Officer or Director

Date