2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2011
Secretary of State

DOCUMENT# N12768

Entity Name: CROSSWINDS HOMEOWNER'S ASSOCIATION OF FT. WALTON BEACH, INC.

Current Principal Place of Business:

1913 W MISTRAL LANE
FT. WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

1913 W MISTRAL LANE
FT. WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 59-2827284 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SURBER, SUSAN M
108 BEAL PARKWAY S
FT. WALTON BEACH, FL 32548 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: PD
Name: MENENDEZ, MATT
Address: 1913 W MISTRAL LANE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VPD
Name: STERMAN, MAT
Address: 1913 W MISTRAL LANE
City-St-Zip: FT WALTON BEACH, FL 32547

Title: TD
Name: MOSSMAN, DAN
Address: 1913 W MISTRAL LANE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: SD
Name: STAGE, KELLY
Address: 1913 W MISTRAL LANE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D
Name: O'SHEA, TOM
Address: 1913 W MISTRAL LANE
City-St-Zip: FORT WALTON BEACH, FL 32547

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: TOM O'SHEA D 04/26/2011

Electronic Signature of Signing Officer or Director — Date