## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N12768

Apr 25, 2012 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 

1913 W MISTRAL LANE

FT. WALTON BEACH, FL 32547

**Current Mailing Address: New Mailing Address:** 

1913 W MISTRAL LANE

FT. WALTON BEACH, FL 32547

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

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

SURBER, SUSAN M SURBER, SUSAN M

108 BEAL PARKWAY S 124 E. MIRACLE STRIP PKWY

FT. WALTON BEACH, FL 32548 US SUITE 202

MARY ESTHER, FL 32569 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: SUSAN M SURBER 04/25/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

MENENDEZ, MATT Name: Address: 1913 W MISTRAL LANE

City-St-Zip: FORT WALTON BEACH, FL 32547

Title:

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

Title: TD

MOSSMAN, DAN Name: Address: 1913 W MISTRAL LANE

City-St-Zip: FORT WALTON BEACH, FL 32547

Title: Name:

SD

STAGE, KELLY

Address: 1913 W MISTRAL LANE

City-St-Zip: FORT WALTON BEACH, FL 32547

Title:

Name: O'SHEA, TOM

1913 W MISTRAL LANE Address:

FORT WALTON BEACH, FL 32547 City-St-Zip:

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 04/25/2012