2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# N15705

Entity Name: WINDEMERE AT PONTE VEDRA BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4200 MARSH LANDING BLVD., STE. 200
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

4200 MARSH LANDING BLVD., STE. 200
JACKSONVILLE BEACH, FL 32250 US

New Mailing Address:

FEI Number: 74-2930364 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOVELAND, STEPHEN C
MARSH LANDING MANAGEMENT CO.
4200 MARSH LANDING BLVD., STE. 200
JACKSONVILLE BEACH, FL 32250 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: ST ( ) Delete
Name: CUTLER, ELEANOR
Address: 930 SPINNAKERS REACH DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: P ( ) Delete
Name: VAN ZON, ADRIAN
Address: 555 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019

Title: D ( ) Delete
Name: LEEK, JAY
Address: 951 SPINNAKERS REACH DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP ( ) Delete
Name: VON DER SCHULENBURG, BUSSO GRAF
Address: 330 BLACKLAND ROAD
City-St-Zip: ATLANTA, GA 30342

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T ( ) Change (X) Addition
Name: OLSON, KENNETH
Address: 968 SPINNAKERS REACH DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ADRAIN VAN ZON P 04/24/2006

Electronic Signature of Signing Officer or Director — Date