

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22020

FILED
Apr 06, 2007
Secretary of State

Entity Name: WINDWARD ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 W. STATE ROAD 434
SUITE 5000
LONGWOOD, FL 327795008

New Principal Place of Business:

Current Mailing Address:

2180 W. STATE ROAD 434
SUITE 5000
LONGWOOD, FL 327795008

New Mailing Address:

FEI Number: 59-2936544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT, INC.
2180 W. SR 434, SUITE 5000
LONGWOOD, FL 32779 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 () Delete
Name: CAPUTO, LOUIS
Address: 4430 YACHTMANS CT
City-St-Zip: ORLANDO, FL 32812

Title: VPD () Delete
Name: DIEDRICH, STEVE
Address: 4574 WHEELHOUSE CT
City-St-Zip: ORLANDO, FL 32812

Title: TD () Delete
Name: WEBBER, MAURICE
Address: 4526 WHEELHOUSE CT
City-St-Zip: ORLANDO, FL 32812

Title: D () Delete
Name: PICK, ANDY
Address: 4497 YACHTMAN CT
City-St-Zip: ORLANDO, FL 32812

Title: D () Delete
Name: CUNNINGHAM, ROY
Address: 4418 YACHTMANS CT
City-St-Zip: ORLANDO, FL 32812

Title: SD () Delete
Name: CAFFERY, TOM
Address: 4406 YACHTMANS CT
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: CAPUTO, LOUIS
Address: 4430 YACHTMANS CT
City-St-Zip: ORLANDO, FL 32812

Title: TD (X) Change () Addition
Name: DIEDRICH, STEVE
Address: 4574 WHEELHOUSE CT
City-St-Zip: ORLANDO, FL 32812

Title: D (X) Change () Addition
Name: BURKHOLDER, RANDY
Address: 4484 YACHTMANS CT
City-St-Zip: ORLANDO, FL 32812

Title: SD (X) Change () Addition
Name: PICKERING, ANDY
Address: 4497 YACHTMAN CT
City-St-Zip: ORLANDO, FL 32812

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

Title: PD (X) Change () Addition
Name: CAFFERY, TOM
Address: 4406 YACHTMANS CT
City-St-Zip: ORLANDO, FL 32812

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: TOM CAFFERY

PD

04/06/2007

Electronic Signature of Signing Officer or Director

Date