

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23637

FILED
Apr 27, 2011
Secretary of State

Entity Name: THE WINDWARDS AT HARBOURSIDE OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

C/O LIBERTE MGMT
10681 GULF BLVD SUITE 207
TREASURE ISLAND, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

C/O LIBERTE MGMT
10681 GULF BLVD SUITE 207
TREASURE ISLAND, FL 33706 US

New Mailing Address:

FEI Number: 59-2880483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIBERTE MGMT
10681 GULF BLVD SUITE 207
SAINT PETERSBURG, FL 33706 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: VP
Name: BACHELER, TOM
Address: 7932 SAILBOAT KEY BOULEVARD SUITE 801
City-St-Zip: SOUTH PASADENA, FL 33707

Title: T
Name: CATALIOTO, ANTHONY
Address: 7932 SAILBOAT KEY BLVD # 101
City-St-Zip: SOUTH PASADENA, FL 33707

Title: P
Name: FLAY, TIM
Address: 7932 SAILBOAT KEY BLVD #503
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: S
Name: FRANCES, GORDON
Address: 7932 SAILBOAT KEY BLVD #301
City-St-Zip: S. PASADENA, FL 33707

Title: D
Name: DORSTEN, JOHN
Address: 7922 SAILBOAT KEY BLVD #108
City-St-Zip: S. PASADENA, FL 33707

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: TIM FLAY

P

04/27/2011

Electronic Signature of Signing Officer or Director

Date