


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 12, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N34215</b> 1. Entity Name WINDWARD POINT BOATING ASSOCIATION, INC.	
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Principal Place of Business % JORGENSEN, CHRISTIAN, L. 4203 BAYBEACH LN. H-5 FT. MYERS BEACH, FL 33931 US	Mailing Address % JORGENSEN, CHRISTIAN, L. 4203 BAYBEACH LN. H-5 FT. MYERS BEACH, FL 33931 US
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**DO NOT WRITE IN THIS SPACE**



02032005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0154408	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

JORGENSEN, CHRISTIAN L  
4203 BAYBEACHLANE, #H-5  
PO BOX 2520  
FT. MYERS, FL 33931

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHELDON, DALE 25 SOUTH MAIN ST YALE, MI 48097
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LEVESQUE, NORMAN 38 DEER RUN TERR EAST LONGMEADOW, MA 01028
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD JORGENSEN, CHRISTIAN 4203 BAY BCH LN H-5 FORT MYERS BEACH, FL 33931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000225225  
02/12/05-80007-014 61.25

**DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Christian L. Jorgensen CHRISTIAN L. JORGENSEN 2-4-05 239 463-4796

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #