

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 08:00 A
Secretary of State

DOCUMENT # N34215

1. Entity Name

WINDWARD POINT BOATING ASSOCIATION, INC.



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



03142007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0154408

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

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

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03/28/07-80022-025 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

3/16/07

239-463-4796

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #