

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 19, 2012**  
**Secretary of State**

DOCUMENT# N35928

**Entity Name:** LEEWARD WINDS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2860 OCEAN SHORE BLVD.  
ORMOND BEACH, FL 32176**New Principal Place of Business:****Current Mailing Address:**PO BOX 1527  
ORMOND BEACH, FL 32175**New Mailing Address:****FEI Number:** 59-2990803**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**KREINEST, DEBORAH  
1100 OCEAN SHORE BLVD #9  
ORMOND BEACH, FL 32176 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  
Name: BOOTH, ELEANOR  
Address: 1755 SWEETWATER WEST CIR  
City-St-Zip: APOPKA, FL 32712

Title: SEC  
Name: POUND, RUTH  
Address: 2860 OCEAN SHORE BLVD 407  
City-St-Zip: ORMOND BEACH, FL 32176

Title: VP  
Name: CARTER, DONITA  
Address: 2680 OCEAN SHORE BLVD #107  
City-St-Zip: ORMOND BEACH, FL 32176

Title: TREA  
Name: FROHMAN, LANCE  
Address: 42 PIERCE RD #181  
City-St-Zip: PRESTON, CT 06365

Title: D  
Name: LYLE, PAM  
Address: 43683 ABBEY CIR  
City-St-Zip: CANTON, MI 48187

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: ELEANOR BOOTH

PRES

04/19/2012

Electronic Signature of Signing Officer or Director

Date