2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2009
Secretary of State

DOCUMENT# N36752

Entity Name: WINDWARD PATIO ASSOCIATION, INC.

Current Principal Place of Business:

3899 CAPE HAZE DR.
PO BOX 475
CAPE HAZE, FL 33946 US

New Principal Place of Business:

3899 CAPE HAZE DR.
ROTONDA WEST, FL 33947 US

Current Mailing Address:

PO BOX 475
CAPE HAZE, FL 33946 US

New Mailing Address:

PO BOX 475
PLACIDA, FL 33946 US

FEI Number: 65-0183771 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BRANDENBERGER, JOHN E.
3899 CAPE HAZE DR
CAPE HAZE, FL 33946 US

Name and Address of New Registered Agent:

BRANDENBERGER, JOHN E.
3899 CAPE HAZE DR
ROTONDA WEST, FL 33947 US

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: _____ 04/01/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: ANTONUCCI, PASQUALE J
Address: 3899 CAPE HAZE DR
City-St-Zip: PLACIDA, FL 33946

Title: VD ( ) Delete
Name: PROCASKY, GENE L
Address: 3899 CAPE HAZE DR
City-St-Zip: PLACIDA, FL 33946

Title: SD ( ) Delete
Name: MUDD, CHARLES
Address: 3899 CAPE HAZE DR
City-St-Zip: PLACIDA, FL 33946

Title: VD ( ) Delete
Name: MCGUANE, GALE
Address: 3899 CAPE HAZE DR
City-St-Zip: PLACIDA, FL 33946

Title: PD ( ) Delete
Name: KEARNS, MICHAEL
Address: 3899 CAPE HAZE DR
City-St-Zip: PLACIDA, FL 33946

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: BICCUM, ALVY
Address: 3899 CAPE HAZE DR
City-St-Zip: ROTONDA WEST, FL 33947

Title: VD (X) Change ( ) Addition
Name: AMES, ARDSLEY
Address: 3899 CAPE HAZE DR
City-St-Zip: ROTONDA WEST, FL 33947

Title: SD (X) Change ( ) Addition
Name: MUDD, CHARLES
Address: 3899 CAPE HAZE DR
City-St-Zip: ROTONDA WEST, FL 33947

Title: VD (X) Change ( ) Addition
Name: MCGUANE, GALE
Address: 3899 CAPE HAZE DR
City-St-Zip: ROTONDA WEST, FL 33947

Title: PD (X) Change ( ) Addition
Name: KEARNS, MICHAEL
Address: 3899 CAPE HAZE DR
City-St-Zip: ROTONDA WEST, FL 33947

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL KEARNS PD 04/01/2009
Electronic Signature of Signing Officer or Director — Date