## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36752

FILED Mar 03, 2011 Secretary of State

Entity Name: WINDWARD PATIO ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3899 CAPE HAZE DR.

ROTONDA WEST, FL 33947 US

**Current Mailing Address: 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: Name and Address of New Registered Agent:

BRANDENBERGER, JOHN E. BRANDENBERGER, JOHN E 3899 CAPE HAZE DR 3899 CAPE HAZE DR

ROTONDA WEST, FL 33947 US 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: JOHN E. BRANDENBERGER 03/03/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

MISERLIAN, GARY Name: Address: 3899 CAPE HAZE DR City-St-Zip: ROTONDA WEST, FL 33947

Title:

Name: TRENT, ROBYN Address: 3899 CAPE HAZE DR City-St-Zip: ROTONDA WEST, FL 33947

Title: PD

MUDD, CHARLES Name: Address: 3899 CAPE HAZE DR City-St-Zip: ROTONDA WEST, FL 33947

Title: SD

Name: MALLORY, JERRY 3899 CAPE HAZE DR Address: ROTONDA WEST, FL 33947 City-St-Zip:

Title:

KEARNS, MICHAEL Name: 3899 CAPE HAZE DR Address: City-St-Zip: ROTONDA WEST, FL 33947

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.

**PRES** SIGNATURE: CHARLES MUDD 03/03/2011