

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44960

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: WINDWARD CAY COMMUNITY ASSOCIATION, INC.

## Current Principal Place of Business:

2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 32779 US

## New Principal Place of Business:

## Current Mailing Address:

2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 32779 US

## New Mailing Address:

FEI Number: 59-3085569      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HART, JAMES W JR  
SENTRY MANAGEMENT, INC  
2180 W SR 434, SUITE 5000  
LONGWOOD, FL 32779 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 ( ) Delete  
Name: JONES, ROSE  
Address: 4809 PLINY CT  
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete  
Name: DIXON, MICHAEL  
Address: 4811 PLINY CT  
City-St-Zip: KISSIMMEE, FL 34746

Title: STD ( ) Delete  
Name: HENKEN, DON  
Address: 4776 WINDWOOD DR  
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete  
Name: DIXON, MICHAEL  
Address: 4811 PLINY CT  
City-St-Zip: KISSIMMEE, FL 34746

Title: D (X) Delete  
Name: ASPEY, GORDON  
Address: 4708 WINDWOOD DR  
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete  
Name: BOYD, KEN  
Address: 4817 PLINY CT  
City-St-Zip: KISSIMMEE, FL 34746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: BROOKS, KENT  
Address: 4733 ALEXIS DR  
City-St-Zip: KISSIMMEE, FL 34746

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BOYD, KEN  
Address: 3496 MCCORMICK WOODS DR  
City-St-Zip: OCOEE, FL 34761

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: ROSE JONES

PD

04/08/2009

Electronic Signature of Signing Officer or Director

Date