2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# N96000001075

Entity Name: TRADEWINDS TOWNHOMES OWNERS, INC.

Current Principal Place of Business:

9216 NAVARRE PKWY
NAVARRE, FL 32566 US

New Principal Place of Business:

Current Mailing Address:

9216 NAVARRE PKWY
NAVARRE, FL 32566 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

MILLER, YVONNA
9216 NAVARRE PKWY
NAVARRE, FL 32566 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: P ( ) Delete
Name: HORTON, KARL PRES.
Address: 1422 TINA DRIVE
City-St-Zip: NAVARRE, FL 32566 US

Title: T ( ) Delete
Name: PEADEN, MARSHA J TREAS.
Address: 1466 SONATA CT.
City-St-Zip: NAVARRE, FL 32566 US

Title: VD ( ) Delete
Name: FOURNIER, MARYANN VP
Address: 1430 TINA DRIVE 10
City-St-Zip: NAVARRE, FL 32566 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HORTON, KARL PRES.
Address: 7031 PRO AM COURT
City-St-Zip: NAVARRE, FL 32566 US

Title: T (X) Change ( ) Addition
Name: FAULK, RICKY TREAS.
Address: 200 LONG PLANTATION APT. D
City-St-Zip: LAFAYETTE, LA 70508 US

Title: VD (X) Change ( ) Addition
Name: FOURNIER, KENNETH VP
Address: 1430 TINA DRIVE 10
City-St-Zip: NAVARRE, FL 32566 US

I hereby certify that the information supplied with this filing does not qualify for the 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: KARL HORTON P 04/10/2006

Electronic Signature of Signing Officer or Director — Date