2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003831

FILED May 17, 2006 Secretary of State

Entity Name: WINDWARD COVE HOMEOWNERS ASSOCIATION OF AMELIA ISLAND, INC.

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

4942 WINDWARD PLACE

FERNANDINA BEACH, FL 32034

Current Mailing Address: New Mailing Address:

4942 WINDWARD PLACE FERNANDINA BEACH, FL 32034

FEI Number: 59-3424826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

TASSEY, MARGARET
4942 WINDWARD PLACE

FERNANDINA BEACH, FL 32034 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV () Delete Title: DS (X) Change () Addition

Name:PATTERSON, DIANNEName:PATTERSON, DIANNEAddress:4943 WINDWARD PLACEAddress:4943 WINDWARD PLACECity-St-Zip:FERNANDINA BEACH, FL 32034City-St-Zip:FERNANDINA BEACH, FL 32034

Title: DT () Delete Title: () Change () Addition

 Name:
 TASSEY, MARGARET
 Name:

 Address:
 4942 WINDWARD PLACE
 Address:

 City-St-Zip:
 FERNANDINA BEACH, FL 32034
 City-St-Zip:

Title: DP () Delete Title: DP (X) Change () Addition

Name:MOORE, JERIName:HOWARD, GENEAddress:4951WINDWARD PLACEAddress:4939WINDWARD PLACECity-St-Zip:FERNANDINA BEACH, FL 32034City-St-Zip:FERNANDINA BEACH, FL 32034

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: MARGARET TASSEY DT 05/17/2006