

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2007 8:00 am
Secretary of State

03-28-2007 90019 021 ****61.25

DOCUMENT # N97000006209	
1. Entity Name	
SOUTHPOINTE AT WINDSTAR MARINA ASSOCIATION, INC.	

Principal Place of Business	Mailing Address
1777 GULF STAR BLVD NAPLES FL 34112	P.O. BOX 2072 MARCO ISLAND FL 34146 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number	Applied For
65-0574806	Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
Bennett PATAS, DENISE SOUTHPOINTE AT WINDSOR MARINA PO BOX 2072 MARCO ISLAND FL 34146-2072

7. Name and Address of New Registered Agent
Name Denise Bennett
Street Address (P.O. Box Number is Not Acceptable)
Southpointe at Windsor Marina 370 Bald Eagle Dr.
City Marco Island FL Zip Code 34146

8. 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. I am familiar with and accept the obligations of registered agent.
SIGNATURE <i>Denise Bennett</i> DATE 3-14-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	P ☐ Delete
NAME	DIXON, MICHAEL
STREET ADDRESS	5085 YACHT HARBOR DR 101
CITY- ST- ZIP	NAPLES FL 34112
TITLE	S ☒ Delete
NAME	KOENTOPP, RICK
STREET ADDRESS	5080 YACHT HARBOR CIR 101
CITY- ST- ZIP	NAPLES FL 34112
TITLE	T ☒ Delete
NAME	GAUNTT, RANDY
STREET ADDRESS	3276 LOOKOUT LANE
CITY- ST- ZIP	NAPLES FL 34112
TITLE	VP ☐ Delete
NAME	FINK, DIANE
STREET ADDRESS	4990 CHRISTINA CT
CITY- ST- ZIP	NAPLES FL 34112
TITLE	OM ☐ Delete
NAME	KICKLIGHTER, CLOISE
STREET ADDRESS	6961 BOTTLEBRUSH LN
CITY- ST- ZIP	NAPLES FL 34109
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ Change ☒ Addition
NAME	John Horton
STREET ADDRESS	1717 Gulfstar Drive S. #202
CITY- ST- ZIP	Naples, FL 34112
TITLE	☐ Change ☒ Addition
NAME	Gail Dale
STREET ADDRESS	470 Bolland Ct.
CITY- ST- ZIP	Naples, FL 34112
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.
SIGNATURE: <i>Michael Dixon</i> DATE 3-15-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR