

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 10, 2009
Secretary of State**

DOCUMENT# N98000001494

Entity Name: CONDOMINIUM ASSOCIATION OF SOUTHWIND, INC.

Current Principal Place of Business:

1650 WEST MARION AVENUE
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

2421 SHREVE STREET
SUITE 115
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 65-0824727 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENNETT, DOROTHY M
2421 SHREVE STREET
115
PUNTA GORDA, FL 33950 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: SD () Delete
Name: PERKINS, NANCY
Address: 1650 W MARION AVE # 132
City-St-Zip: PUNTA GORDA, FL 33950

Title: VPD () Delete
Name: GARY, MIKE
Address: 1811 WOOD VALLEY DR
City-St-Zip: CARMEL, IN 46032

Title: PD () Delete
Name: CARROLL, JIM
Address: 1650 WEST MARON SUITE 134
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: LAZAR, FRANK
Address: 1650 WEST MARON SUITE 142
City-St-Zip: PUNTA GORDA, FL 33950

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: DOROTHY M. BENNETT

CAM

04/10/2009

Electronic Signature of Signing Officer or Director

_____ Date