2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 24, 2006 8:00 am **Secretary of State** DOCUMENT # N99000001989 1. Entity Name 01-24-2006 90016 008 ****61.25 WINDWARD SOUTH CONDO INC. Principal Place of Business Mailing Address 3845 SOUTH ATLANTIC AVE., #7 DAYTONA BEACH SHORES FL 32118 3845 SOUTH ATLANTIC AVE., #7 DAYTONA BEACH SHORES FL 32118 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CB2F037 (10/05) City & State City & State Applied For 4. FEI Number 52-2220815 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SHAKER, MAĴORIE 3845 SOUTH ATLANTIC AVE., #7 Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH SHORES FL 32118 City Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) TOWN TO BUILD OF THE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Change TITLE ☐ Delete TITLE ☐ Addition SHAKER, MARJORIE NAME NAME STREET ADDRESS 3845 SOUTH ATLANTIC AVE., #7 STREET ADDRESS DAYTONA BEACH SHORES FL 32118 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE □ Change RASALA, CHESTER NAME NAME 3845 SOUTH ATLANTIC AVE., #2 STREET ADDRESS STREET ADDRESS DAYTONA BEACH SHORES FL 32118 CITY-ST-ZIP CITY-ST-ZIP JOELYN CARLASARE Schange 3845 SOUTH ATLANTIC #4 TITI F **Delete** TITLE MERRITT, LAWRENCE R NAME NAME STREET ADDRESS 3845 SOUTH ATLANTIC AVE #3 STREET ADDRESS DAYTONA BEACH SHORES FL. 32118 CITY-ST-ZIP DAYTONA BEACH SHORES FL 32118 CITY-ST-ZIP SD Change ☐ Addition TITLE Delete TITLE MERRITT, ADELINE S NAME NAME STREET ADDRESS STREET ADDRESS 3845 SOUTH ATLANTIC AVE #3 DAYTONA BEACH SHORES FL 32118 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition OLLINGER, PATRICIA NAME NAME 3845 SOUTH ATLNATIC AVE #11 STREET ADDRESS STREET ADDRESS DAYTONA BEACH SHORES FL 32118 CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ☐ Delete RASALA, FRANKIE A NAME NAME 3845 SOUTH ATLANTIC AVE #2 STREET ADDRESS STREET ADDRESS DAYTONA BEACH SHORES FL 32118 CITY-ST-ZIP 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.

00 SIGNATURE: MA MONISZ 1/18/06 386-761-6537

FILED