

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000076178

FILED  
Feb 07, 2008  
Secretary of State

Entity Name: TRADEWINDS AT OCHLOCKONEE BAY, INC.

**Current Principal Place of Business:**

1953 THOMASVILLE ROAD  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

1953 THOMASVILLE ROAD  
TALLAHASSEE, FL 32303

**New Mailing Address:**

FEI Number: 56-2381559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MANAUSA, DANIEL E  
3520 THOMASVILLE ROAD 4TH FLOOR  
TALLAHASSEE, FL 32309 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: NAUMANN, JASON  
Address: 1953 THOMASVILLE ROAD  
City-St-Zip: TALLAHASSEE, FL 32303

Title: SD ( ) Delete  
Name: HANSELMAN, DAVID  
Address: 3031 ELIZA ROAD STE 1  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: NELSON, TERRY C  
Address: 1437 VIEUX CARRE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID W. HANSELMAN

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02/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date