

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760978

Entity Name: SOUTHWINDS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1215 SOUTHAMPTON DRIVE
PORT ORANGE, FL 32129**Current Mailing Address:**P.O. BOX 290413
S DAYTONA, FL 32129 US**FEI Number:** 59-2722002**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER, LYNN C
CAREY REALTY MANAGEMENT, INC.
3280 S. ATLANTIC AVE. SUITE A
DAYTONA SHORES, FL 32118 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**Officer/Director Detail :**

Title	TREASURER
Name	BIGELOW, PAUL E
Address	1109 SOUTHLAND COURT
City-State-Zip:	PORT ORANGE FL 32129

Title	PRESIDENT
Name	RUNDALL, JEFF
Address	1102 SOUTHLAND COURT
City-State-Zip:	PORT ORANGE FL 32129

Title	VP
Name	ADAZZIO, JOSEPH
Address	1119-2 SOUTHWINDS DRIVE
City-State-Zip:	PORT ORANGE FL 32129

Title	DIRECTOR
Name	BORGESON, STEVEN
Address	1104-C SOUTHAMPTON DRIVE
City-State-Zip:	PORT ORANGE FL 32129

Title	DIRECTOR
Name	MARTIN, ERIC
Address	1134 HERMITAGE COURT
City-State-Zip:	PORT ORANGE FL 32129

Title	DIRECTOR
Name	MORRIS, JOHN
Address	1116 SOUTHWINDS DRIVE
City-State-Zip:	PORT ORANGE FL 32129

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH ADAZZIO

V. PRES

01/13/2021

Electronic Signature of Signing Officer/Director Detail_____
Date