

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 768645

**FILED**  
**Mar 11, 2020**  
**Secretary of State**  
**4192077781CC**

**Entity Name:** WESTWINDS VILLAGE, INC.

**Current Principal Place of Business:**

5316 53RD AVE. E.  
ADMINISTRATION OFFICE  
BRADENTON, FL 34203

**Current Mailing Address:**

5316 53RD AVE. E.  
ADMINISTRATION OFFICE  
BRADENTON, FL 34203 US

**FEI Number:** 65-0101676

**Certificate of Status Desired:** No

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

DOMBER, HARLAN R  
3900 CLARK ROAD  
SUITE L-1  
SARASOTA, FL 34233 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:** HARLAN R DOMBER

03/11/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title BOARD PRESIDENT  
Name MCGALLIARD, AMOS TROY  
Address 5316 53RD AVE. E.  
ADMINISTRATION OFFICE A-13  
City-State-Zip: BRADENTON FL 34203

Title VICE-PRESIDENT  
Name JEFF, BROTT  
Address 5316 53RD AVE. E.  
ADMINISTRATION OFFICE V-7  
City-State-Zip: BRADENTON FL 34203

Title SECRETARY  
Name RANDY, HUEBERT  
Address 5316 53RD AVE. E.  
ADMINISTRATION OFFICE Q-19  
City-State-Zip: BRADENTON FL 34203

Title TREASURER  
Name GARY, JONES  
Address 5316 53RD AVE. E.  
ADMINISTRATION OFFICE F-32  
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR  
Name ELLEN, MALONEY  
Address 5316 53RD AVE. E.  
ADMINISTRATION OFFICE I-20  
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR  
Name DOUG, KUBIAK  
Address 5316 53RD AVE. E.  
ADMINISTRATION OFFICE V-6  
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR  
Name THORBURN, THOMAS  
Address 5316 53RD AVE. E.  
ADMINISTRATION OFFICE N-9  
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR  
Name ELEY, DAVE  
Address 5316 53RD AVE. E.  
ADMINISTRATION OFFICE F-12  
City-State-Zip: BRADENTON FL 34203

**Continues on page 2**

*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:** AMOS MCGALLIARD

BOARD PRESIDENT

03/11/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            MCGRAIL, HUGH  
Address        5316 53RD AVE. E.  
                  ADMINISTRATION OFFICE Q-124  
City-State-Zip: BRADENTON FL 34203

Title            VP OF REAL ESTATE  
Name            TRIMPE, JULIE  
Address        PO BOX 50332  
City-State-Zip: SARASOTA FL 34232