

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000727

Entity Name: THE WINDS OF ST. ARMANDS, SOUTH HOMEOWNERS ASSOCIATION INC.**Current Principal Place of Business:**3000 NORTH TUTTLE AVE.
SARASOTA, FL 34234**Current Mailing Address:**2942 CIMARRON COVE.
SARASOTA, FL 34234 US**FEI Number: 59-2645721****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**LA FOLLETT, B DUANE
2942 CIMARRON COVE
SARASOTA, FL 34234 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: B. DUANE LA FOLLETT****01/18/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LA FOLLETT, B DUANE
Address 2942 CIMARRON COVE
City-State-Zip: SARASOTA FL 34234

Title 2ND VICE PRESIDENT
Name KLOSS, GLORIA J
Address 3089 GOLDEN TERRACE
City-State-Zip: SARASOTA FL 34234

Title SECRETARY
Name DOWNIE, CHERI
Address 2825 GOLDEN TERRACE
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR OF ACTIVITIES
Name IVEY, DOUGLAS L
Address 2971 BAY OAKS DRIVE
City-State-Zip: SARASOTA FL 34234

Title 1ST VICE PRESIDENT
Name BENEDICT, LINDA
Address 3259 BAY OAKS DR
City-State-Zip: SARASOTA FL 34234

Title TREASURER
Name COX, MARJ
Address 3155 BAY ARISTOCRAT DR.
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name LARAMEE, PAUL
Address 2919 REGENCY COVE
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name PARMAKIAN, NANCY
Address 3396 BAY OAKS DR.
City-State-Zip: SARASOTA FL 34234

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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: MARJORIE COX**TREASURER****01/18/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CHAMBERS, CAROL
Address	3054 LAMPLIGHTER DR.
City-State-Zip:	SARASOTA FL 34234