

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 538525

FILED
May 06, 2006
Secretary of State

Entity Name: DUNES OF PANAMA RENTAL ASSOCIATION, INC.

Current Principal Place of Business:

7205 THOMAS DRIVE
PANAMA CITY BCH, FL 32408

New Principal Place of Business:

Current Mailing Address:

7205 THOMAS DRIVE
PANAMA CITY BCH, FL 32408

New Mailing Address:

FEI Number: 59-1838117 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOHN R. ARNOLD
7205 THOMAS DRIVE
PANAMA CITY, FL 32408 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: SCHAFER, JOYCE MRS.
Address: 136 ALEXANDRIA DR
City-St-Zip: MACON, GA

Title: D () Delete
Name: HUGHES, GENE
Address: 433 A N DALEVINE AVE
City-St-Zip: DALEVILLE, AL 36322

Title: S () Delete
Name: BOWLES, JANE
Address: P.O DRAWER 99 N/A
City-St-Zip: CUTHBERT, GA

Title: D () Delete
Name: JOHNSON, LARRY
Address: 1474 GREY FOX RUN
City-St-Zip: TALLAHASSEE, FL 32311

Title: P () Delete
Name: DAVID HAWKINS,
Address: 1753 ARGONNE DRIVE
City-St-Zip: MORROW, GA

Title: D () Delete
Name: BEAM, JANICE
Address: 5111 BOYD DR
City-St-Zip: COLUMBUS, GA 30206

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:

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 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 HAWKINS

P

05/06/2006

Electronic Signature of Signing Officer or Director

_____ Date