

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 743531 (6)

1. Corporation Name

FORT WALTON BEACH VISTA DEL MAR CONDOMINIUMS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

925 WHELK COURT
FORT WALTON BEACH FL 32548

925 WHELK COURT
FORT WALTON BEACH FL 32548

3. Date Incorporated or Qualified
07/11/1978

3a. Date of Last Report
01/25/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
59-2070449

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HEBERT, MARSHALL
217 MCARTHUR AVE.
FT. WALTON BEACH FL 32548

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME JENSEN, SCOTT
STREET ADDRESS 359 EVERGREEN PLACE
CITY-STATE-ZIP DESTIN FL

☐ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE STD
NAME HERBERT, FRANCIS
STREET ADDRESS 217 MC ARTHUR AVENUE
CITY-STATE-ZIP FT. WALTON BEACH FL

☐ DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

*NAME CORRECTION,
HEBERT, FRANCIS

☐ Change ☐ Addition

TITLE TD
NAME FERKES, GEORGE C.
STREET ADDRESS 528 PARRISH POINT BLVD
CITY-STATE-ZIP MARY ESTHER FL

☒ DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE D
NAME WOODS, JOHN
STREET ADDRESS 925 WHELK CT., #2
CITY-STATE-ZIP FT. WALTON BCH. FL

☒ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

Vice President
CHRISTIANSON, NEIL
751 SEAHORSE AVE.
FT. WALTON BCH., FL. 32548

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

Director
READDY, WILLIAM
221 ANTIQUA WAY
NICEVILLE, FL. 32578

☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

Scott H. Jensen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SCOTT H. JENSEN, PRESIDENT 4/5/96

Date

704-243-0339
Daytime Phone #

CR2E037 (12/95)