2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State
03-03-2006 90109 009 ****61.25

DOCUMENT # 758552

1. Entity Name
SOLANA SHORES OWNERS ASSOC., INC.

Principal Place of Business	Mailing Address
14761 PERDIDO KEY DR PENSACOLA, FL 32507 US	14761 PERDIDO KEY DR # 1 PENSACOLA, FL 32507 US

02252006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. #3
City & State	City & State PENSACOLA, FL
Zip / Country	Zip 32507 / Country

4. FEI Number 59-2320835 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JENS, DANIEL K 14761 PERDIDO KEY DR #1 PENSACOLA, FL 32507	Name Street Address (P.O. Box Number is Not Acceptable) #3 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BECNEL, JAN 14761 PERDIDO KEY DR #1 PENSACOLA, FL 32507	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MANNING, JERRY P.O. Box 1728 TUSCALOOSA, ALA. 35403	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JENS, DANIEL K 181 W OAKRIDGE PK METAIRIE, LA 700054020	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LATSHAW, MILDRED M. 1001 N. BARCELONA PENSACOLA, FL 32501	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LATSHAN, TODD 1001 N BARCELONA PENSACOLA, FL 32501	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD JONES, RICK PO BOX 120 RABUN GAP, GA 30568	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel K. Jens DANIEL K. JENS 2-25-06 504-838-9434
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TREASURER Date Daytime Phone #