

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006395

FILED
Jan 28, 2005
Secretary of State

Entity Name: GRAND DUNES CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

25 WALTER MARTIN RD NE
FT WALTON BCH, FL 32548

New Principal Place of Business:

9815 HIGHWAY 98 WEST
DESTIN, FL 32550 US

Current Mailing Address:

25 WALTER MARTIN RD NE
FT WALTON BCH, FL 32548

New Mailing Address:

9815 HIGHWAY 98 WEST
DESTIN, FL 32550 US

FEI Number: 55-0857357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERMANN, RICHARD P
25 WALTER MARTIN RD NE
FT WALTON BCH, FL 32548 US

Name and Address of New Registered Agent:

FREEMAN, PAUL
9815 HIGHWAY 98 WEST
DESTIN, FL 32550 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: PAUL FREEMAN

01/28/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FREEMAN, PAUL R
Address: 9815 HWY 98 WEST
City-St-Zip: DESTIN, FL 32541

Title: DV () Delete
Name: BERMAN, BRAD R
Address: 9815 HWY 98 WEST
City-St-Zip: DESTIN, FL 32541

Title: DST () Delete
Name: WILLIAMS, DEBRA D
Address: 9815 HWY 98 WEST
City-St-Zip: DESTIN, FL 32541

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL R FREEMAN

DP

01/28/2005

Electronic Signature of Signing Officer or Director

Date