2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000283

FILED Apr 27, 2006 Secretary of State

Entity Name: TWIN LAKES TOWNHOMES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

986A AIRPORT ROAD DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

P.O. BOX 5618 P.O. BOX 5392

DESTIN, FL 32540 DESTIN, FL 325405392

FEI Number: 20-0921699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAVIS, BRADFORD R
984 AIRPORT ROAD
DESTIN, FL 32541 US
DAVIS, BRADFORD
984 AIRPORT ROAD
DESTIN, FL 32541 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: BRADFORD DAVIS 04/27/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PRES (X) Change () Addition Name: DAVIS, BRADFORD R Name: DAVIS, BRADFORD

 Address:
 984 AIRPORT ROAD
 Address:
 984 AIRPORT ROAD

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 DESTIN, FL 32541

Title: VPRE () Change (X) Addition

 Name:
 Name:
 DOKEY, CATHERINE

 Address:
 Address:
 419 TWIN LAKES LANE

 City-St-Zip:
 City-St-Zip:
 DESTIN, FL 32541

Title: () Delete Title: TRES () Change (X) Addition

 Name:
 Name:
 WILLIS-PETRÂROI, JÂNÊT

 Address:
 Address:
 415 TWIN LAKES LANE

 City-St-Zip:
 City-St-Zip:
 DESTIN, FL 32541

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANET E. WILLIS-PETRAROI TRES 04/27/2006