## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0400000810

FILED Apr 29, 2005 Secretary of State

Entity Name: VILLA COYABA CONDOMINIUM ASSOCIATION, INC.

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

1414 COUNTY HIGHWAY 283 SOUTH, PMB 123 755 GRAND BLVD. SANTA ROSA BEACH, FL 32459 SUITE B105 PMB #348 DESTIN. FL 32550

Current Mailing Address: New Mailing Address:

1414 COUNTY HIGHWAY 283 SOUTH, PMB 123 755 GRAND BLVD. SANTA ROSA BEACH, FL 32459 SUITE B105 PMB #348 DESTIN, FL 32550

FEI Number: 20-1459051 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:

BURKE, M. TODD 215 GRAND BLVD SUITE 101 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: TEW, MARILYN Name: MCCARTHY, PATRICK

Address: 1414 COUNTY HIGHWAY 283 SOUTH, PMB 123 Address: 755 GRAND BLVD., SUITE B105 PMB #348

City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: DESTIN, FL 32550

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

Name: SPRENKLE, JASON Name: SPRENKLE, JASON

Address: 1414 COUNTY HIGHWAY 283 SOUTH, PMB 123 Address: 755 GRAND BLVD., SUITE B105 PMB #348

City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: DESTIN, FL 32550

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

 Name:
 MCCARTHY, PATRICK
 Name:

 Address:
 1414 COUNTY HIGHWAY 283 SOUTH, PMB 123
 Address:

 City-St-Zip:
 SANTA ROSA BEACH, FL 32459
 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: JASON SPRENKLE DP 04/29/2005