

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003615

FILED
Mar 22, 2007
Secretary of State

Entity Name: ARIEL DUNES II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

348 ENTERPRISE DR
VALDOSTA, GA 31601

New Principal Place of Business:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550

Current Mailing Address:

348 ENTERPRISE DR
VALDOSTA, GA 31601

New Mailing Address:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550

FEI Number: 20-8312795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAEMER, MARY K
4475 LEGENDARY DR
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

GORMLEY, TERRY P
215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, 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: TERRY P GORMLEY

03/22/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: JONES, C WAYNE
Address: 184 TWELVE OAKS LANE
City-St-Zip: FREEPORT, FL 32439

Title: DT () Delete
Name: HOMLES, R RYAN
Address: 348 ENTERPRISE DR
City-St-Zip: VALDOSTA, GA 31601

Title: DS () Delete
Name: KING, KEVIN
Address: 348 ENTERPRISE DR
City-St-Zip: VALDOSTA, GA 31601

Title: DP () Delete
Name: ANDREWS, ANGUS JR
Address: 694 BALDWIN AVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANDREWS, ANGUS JR
Address: 694 BALDWIN AVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: DV (X) Change () Addition
Name: JONES, C WAYNE
Address: 184 TWELVE OAKS LN
City-St-Zip: FREEPORT, FL 32439

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: HOLMES, R RYAN
Address: 348 ENTERPRISE DR
City-St-Zip: VALDOSTA, GA 31601

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: ANGUS ANDREWS JR

P

03/22/2007

Electronic Signature of Signing Officer or Director

Date