


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2005 08:00 AM
Secretary of State

DOCUMENT # N95000003448 1. Entity Name EMERALD TOWERS WEST OWNERS ASSOCIATION, INC.	
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Principal Place of Business 780 SUNDAIL COURT FT. WALTON BEACH FL 32548	Mailing Address 43 SW MIRACLE STRIP PKWY FORT WALTON BEACH FL 32548 US
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1st MOORE CR2E037 (10/04)

2. Principal Place of Business	3. Mailing Address	4. FEI Number 59-3352221
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Applied For <input type="checkbox"/> Not Applicable
City & State	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip	Country	Zip
	Country	

6. Name and Address of Current Registered Agent
BROOKS, SHOREY AND ASSOCIATES 43 SW MIRACLE STRIP PARKWAY FORT WALTON BEACH FL 32548

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

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	
TITLE	P JACKSON, RONNIE <input type="checkbox"/> Delete
NAME	4788 SANDPIPER LANE
STREET ADDRESS	BIRMINGHAM AL 35244
CITY - ST - ZIP	
TITLE	D ANSON, JIM <input type="checkbox"/> Delete
NAME	N 43 W 23195 BEAVER COURT
STREET ADDRESS	PEWAUKEE WI 53072
CITY - ST - ZIP	
TITLE	D SLUSASZ, STAN <input type="checkbox"/> Delete
NAME	P.O. BOX 4155
STREET ADDRESS	BRANDON MS 39047
CITY - ST - ZIP	
TITLE	D BRYAN, GERRY <input type="checkbox"/> Delete
NAME	780 SUNDIAL COURT
STREET ADDRESS	FORT WALTON BEACH FL 32548
CITY - ST - ZIP	
TITLE	D EVERIDGE, STEVE <input type="checkbox"/> Delete
NAME	2200 BOWMAN CIRCLE
STREET ADDRESS	PELL CITY AL 35125
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000207698
02/01/05-80056-012 61.25

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Gerry Bryan* **GERRY BRYAN** 1-19-05 243-2942
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #