...2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N9700007051



FILED Mar 12, 2008 8:00 am Secretary of State

| 1. Entity Nam | ne | VEST HOMEOWN | ERS AS | SOCIATION, | | | 03 | -12-2008 9 | 90023 030 | ****61.2 | 5 |
|--|--|---|---------------------|------------------------------------|--|--|--------------------------------|----------------|---------------------------|---|--------------------------------|
| Principal Place 12273 U.S. I 204A DESTIN, FL | HWY 98 | ss | P.O. B | Address 60X 1895 N, FL 32541 | | สัญกัสถุก | | | | | |
| 2. Principal Place of Business - No P.O. Box # | | | 3. Mailing Address | | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 01312008 _C | hg-NP | CR2E0 | 37 (12/06) | | |
| City & State | | | City & State | | | 4. FEI Number 59-349080 |)5 | | ⊢ +∸ | oplied For ot Applicable | |
| Zip | | Country | Zip | | Соц | untry | 5. Certificate of S | tatus Desired | | \$8.75 Add | |
| | 6. Name | and Address of Curren | t Registered | l Agent | | | 7. Name and Add | iress of New | Registered / | Agent | |
| C/O WALT | LEIRER | CIATION MANAGEM | IENT | | | Name Street Addres | ss (P.O. Box Number is | Not Acceptat | ole) | | |
| DESTIN, F | | 3011E 204 A | | | | | | | | | |
| and the second s | | | | | | City FL Zip Code | | | | | е |
| | tions of regist | | | | | | | The dialo of f | | Territoria, | — |
| , | Signature typed | d or printed name of registered ager | тапотне гарри | cable. (NOTE | :: Hegistere | d Agent signature requ | uired when reinstating) | | DATE | | |
| | Filing Fe | ee is \$61.25 May 1, 2008 | п апо пве п аррп | 9. Election Can Trust Fund C | mpaign F | Financing | \$5.00 May Be Added to Fees | 1 - | Make checl orida Depar | | |
| 10. | Filing Fe | e is \$61.25 | | 9. Election Can | mpaign F | Financing | \$5.00 May Be | Flo | Make checi orida Depar | tment of S | tate |
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.