

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 13, 2004
Secretary of State**

DOCUMENT# N99000001003

Entity Name: GULF DUNES CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

376 SANTA ROSA BOULEVARD
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

321 HWY 98 E
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-3464895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESTIN RESORTS
321 HWY 98 E
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: SAMETZ, STEPHEN R
Address: 321 HWY 98 E
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: SIEGEL, LEON
Address: 7281 STILLWATER DR
City-St-Zip: COLUMBUS, GA 31904

Title: VP () Delete
Name: GRIMES, FRANK
Address: 901 WINDERMERE BLVD.
City-St-Zip: ALEXANDRIA, LA 73303

Title: D () Delete
Name: KIDD, MAX
Address: 2806 SPREADING OAKS DR
City-St-Zip: ACWORTH, GA 30101

Title: P () Delete
Name: BARTH, GARY
Address: 4209 ASPEN COURT
City-St-Zip: PINEVILLE, LA 71360

Title: ST () Delete
Name: HERBERT, LINDA
Address: 156 TCHEFUNCTA DR
City-St-Zip: COVINGTON, LA 70433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HUDSON, CHARLIE
Address: 5610 OLDE ATLANTA PARKWAY
City-St-Zip: SUWANNEE, GA 30024

Title: D (X) Change () Addition
Name: OLDEN, COLLEEN
Address: 3501-B N. POUNCE DE LEON BLVD. #391
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: VP (X) Change () Addition
Name: GRIMES, FRANK
Address: 901 WINDERMERE BLVD.
City-St-Zip: ALEXANDRIA, LA 73303

Title: D (X) Change () Addition
Name: WILSON, MARY
Address: C-1 FAIRWAY VIEW #3
City-St-Zip: HAMMOND, LA 70401

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

Title: ST (X) Change () Addition
Name: HERBERT, LINDA
Address: 156 TCHEFUNCTA DR
City-St-Zip: COVINGTON, LA 70433

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: GARY BARTH

P

02/13/2004

Electronic Signature of Signing Officer or Director

_____ Date