


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90020 024 ****61.25

DOCUMENT # 750143 1. Entity Name OKALOOSA ISLAND LEASEHOLDERS ASSOCIATION, INC.					
Principal Place of Business 849 TARPON DRIVE FT WALTON BEACH, FL 32548 US			Mailing Address P.O. BOX 8116 FT WALTON BEACH, FL 32548-8116 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
FOSTER, KATHY 849 TARPON DRIVE FT WALTON BCH., FL 32548				Name Street Address (P.O. Box Number is Not Acceptable) City	
				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 <u>KATHY FOSTER</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AYERS, ROBERT 626 PELICAN DRIVE FORT WALTON BEACH, FL 32548 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HOUSTON, MARTY 831 TARPON DRIVE FORT WALTON BEACH, FL 32548 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOSTER, KATHY 849 TARPON DRIVE FT WALTON BEACH, FL 32548 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SIMPSON, JIM 624B PELICAN DRIVE FT WALTON BEACH, FL 32548 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DECKERT, RICK 1350 MIRACLE STRIP PKWY SE FT WALTON BEACH, FL 32548 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPEY, JOHN 850 TARPON DR FT WALTON BEACH, FL 32548 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRUNER, VINCE 573 SANTA ROSA BLVD FT WALTON BEACH, FL 32548 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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: KATHY FOSTER <i>Kathy Foster</i> 2-3-04 (850) 244-4490 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					



OKALOOSA ISLAND LEASEHOLDERS ASSOCIATION, INC.

P.O. BOX 8116

FORT WALTON BEACH, FL 32548

44008077

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302

Dear Sirs:

Attached are our 2004 Uniform Business Report (Document #750143, Okaloosa Island Leaseholders Association, Inc.) and our 2004 filing fee payment in the amount of \$61.25.

Please add the following Directors/Officers to Block 11 of the 2004 UBR.

• Mike Mitchell and Warren Gourley are carryovers from the supplementary 2003 report. There is no change in their status or data. Please continue them as follows:

Title: D
Name: Mitchell, Mike
Street Address: 616 Pelican Drive
City/State/Zip: Fort Walton Beach, FL 32548

Title: D
Name: Gourley, Warren
Street Address: 9 Country Club Drive
City/State/Zip: Destin, FL 32541

• Maryl Bednar is an addition as Secretary. She has replaced Betty Hall whose title has been changed from Secretary to Asst. Secretary. Please add her as follows:

Title: S
Name: Maryl Bednar
Street Address: 721 Sailfish Drive
City/State/Zip: Fort Walton Beach, FL 32548

• Betty Hall is also a carry over from the 2003 report. Her title has been changed from Secretary to Assistant Secretary (Asst. S). Please delete her as Secretary ; then add her as Assistant Secretary as follows:

Title: Asst. S
Name: Hall, Betty
Street Address: 770 Sundial Court, Unit 508
City/State/Zip: Fort Walton Beach, FL 32548

Best regards,

Kathy Foster, President
Okaloosa Island Leaseholders Association, Inc.
(850) 244-4490
fosterpkgnt.net

2-3-04

Date