## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Mar 15, 2004 8:00 am Secretary of State 03-15-2004 90009 027 \*\*\*\*61.25

1. Entity Nam	MEN I # /254// WALKER VILLAS ASSOCIA	ATION INC.		03-13-2004 90009 027
Principal Place of Business C/O AMELIA ISLAND MANAGEMENT 3000 FIRST COAST HWY. AMELIA ISLAND, FL 32034		Mailing Address C/O AMELIA ISLAND MANAGEMENT 3000 FIRST COAST HWY. AMELIA ISLAND, FL 32034		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01062004 Chg-NP CR2E037 (10/03)
City & State		City & State		4. FEI Number
Zip	Country	Zip	Country	5. Certilicate of Status Desired See Required \$8.75 Additional Fee Required
AMELIA IS 3000 FIRS	GEName and Address of Current SLAND MANAGEMENT SLAND PLANTATION ST FIRST COAST HWY SLAND, FL 32034	t Registerett Agent	Ame 1:	d Gregory ess(P.O. Box Number is Not Acceptable) ia Island Management  First CoastHighway ia Island FL 392934
8. The above the obligat	Signature, typed of railed name of redistered age Filling Fee is \$61.25 Due by May 1, 2004	nt and del Roplicable (NOTE: R	AUID GR Registered Agent signature re paign Financing	\$5.00 May Be Added to Fees Florida Department of State
10.	OFFICERS AND D	PIRECTORS Delete	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 P T)
NAME STREET ADDRESS CITY-ST-ZIP	MERRILL, TAYLOR 717 CAMELLIA DR. LA GRANGE, GA	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP	PD ${f f Q}$ Change ${f \Box}$ Addition $30240$
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MONTGOMERY, DAVID PO BOX 285 N/A LEXINGTON, GA 30648	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	STD. WHEELER, WILLIAM 5208 MORRIS DR. TIFTON, GA 31794	. Delete .	NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMLING, JAMES 98 SEA MARSH AMELIA ISLAND, FL 32034	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	STREET ADDRESS CITY-ST-ZIP	D Change X Addition Welch, Oliver 1417 Wesley Walk Atlanta, GA 30327
TITLE NAME STREET ADDRESS CITY-ST-ZIP		! Delete	TITLE NAME  STREET ADDRESS  CITY-ST-ZIP	☐ Change ☐ Addilion.
				in Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director r 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR