


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2005 08:00 AM
Secretary of State

DOCUMENT # N24552 1. Entity Name BEACHWALK OWNERS ASSOCIATION, INC.	
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Principal Place of Business 17751 PANAMA CITY BCH PKWY PANAMA CITY BCH., FL 32413 US	Mailing Address 17751 PANAMA CITY BCH PKWY PANAMA CITY BCH., FL 32413 US
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DO NOT WRITE IN THIS SPACE



01242005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2877328	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

COOK, TRENA
17751 PCB PKWY
16-A
PANAMA CITY BCH., FL 32413

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating)

2/21/05

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

UD0000240355
02/23/05 00027-017 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEPPLER, MEYRLE 6305 RESERVE LINE RD FT. WAYNE, IN 46819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRADLEY, JOHN 17751 PCB PKWY 5BQ PANAMA CITY BEACH, FL 32413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KIRBY, BOB 17751 PCB PKWY 15-E PANAMA CITY, FL 32413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JIM MCNEILL 17751 PC BCH PKWY #10E PANAMA CITY BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD COOK, TRENA 17751 PCB PKWY 16-A PANAMA CITY, FL 32413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Trena Cook* *Secretary* 2/21/05 850 234-3990

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

TRENA COOK