

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2005 8:00 am
Secretary of State

05-02-2005 90478 036 ****61.25
07-07-2005 90009 047 ****61.25

66024555

DOCUMENT # 755955			
1. Entity Name PERDIDO TOWERS OWNERS ASSOCIATION, INC.			
Principal Place of Business 16785 PERDIDO KEY DR PENSACOLA, FL 32507		Mailing Address 16785 PERDIDO KEY DR PENSACOLA, FL 32507	
2. Principal Place of Business		3. Mailing Address P.O. Box 36308	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Pensacola, FL	
Zip	Country	Zip	Country
32516	USA	32516	USA
4. FEI Number 59-2142185		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SWARR, FRANK 16785 PERDIDO KEY DR. PENSACOLA, FL 32507		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		FL	
Zip Code		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 _____ (NOTE: Registered Agent signature required when re-registering)			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$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	PD SWARR, FRANK 6053 LOUIS XIV STREET NEW ORLEANS, LA 70124 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD David Feldman P.O. Box 729 Summit, MS 39666 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DIMARCO, DENNIS 445 LABARRE DR METAIRIE, LA 70001 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	RD Baugh 17 Augusta Drive Brownsburg, IN 46112 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD KELLY, NORMA 545 COALVILLE DR LAWRENCEVILLE, GA 30045 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD Lynn Batten 4737 Cloud Lane Birmingham, AL 35293 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PENDERGRAST, HUNT 16785 PERDIDO KEY DR #1003 PENSACOLA, FL 32507 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Ray Kirby 2400 Bay Vista Pensacola, FL 32503 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD WILSON, SANDRA 1 THE OAKS CIRCLE BIRMINGHAM, AL 35244 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD JONES, GLEN 4921 NEW PROVIDENCE AVE TAMPA, FL 33629 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ 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 its 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: <u>Glenn W Jones Jr</u> 7/9/05			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

Treasurer

813-282-8599

x 230