

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008054

FILED
Jan 31, 2007
Secretary of State

Entity Name: 906 MAR WALT ASSOCIATION, INC.

Current Principal Place of Business:

906 MAR WALT DRIVE
FT WALTON, FL 32547

New Principal Place of Business:

Current Mailing Address:

888 THE MASTERS BLVD
SHALIMAR, FL 32579

New Mailing Address:

FEI Number: 59-3687133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THICKBROOM, PETER A
888 THE MASTERS BLVD
SHALIMAR, FL 32579 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: DST () Delete
Name: THICKBROOM, PETER A
Address: 888 THE MASTERS BLVD
City-St-Zip: SHALIMAR, FL 32579

Title: DV () Delete
Name: THOMPSON, WILLIAM W
Address: 153 BEAL PARKWAY NW
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: DP () Delete
Name: WOODBURN, WESLEY S JR
Address: 88 NE EGLIN PKWY
City-St-Zip: FT WALTON BEACH, FL 32548

Title: DV () Delete
Name: YOUNGBLOOD, RUSSELL
Address: 906 MAR WALT DRIVE
City-St-Zip: FT WALTON, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: PETER A. THICKBROOM

DST

01/31/2007

Electronic Signature of Signing Officer or Director

Date