

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Acct:
Date
Appro:
Descrip

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90015 046 ****70.00

DOCUMENT # 755955

1. Entity Name

PERDIDO TOWERS OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

16785 PERDIDO KEY DR
PENSACOLA FL 32507
US

P.O. BOX 34009
PENSACOLA FL 32507
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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

7. Name and Address of New Registered Agent

HODGES, SHEILA
MEYER REAL ESTATE
16785 PERDIDO KEY DRIVE
PENSACOLA FL 32507

Name

Street Address (P.O. Box Number Not Allowed)

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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 PD ☐ Delete
NAME FELDMAN, DAVID
STREET ADDRESS P.O. BOX 729
CITY ST ZIP SUMMIT MS 39666

TITLE D ☐ Change ☒ Addition
NAME Thomas Adams
STREET ADDRESS 1046 Westbrooke Way NE
CITY ST ZIP Atlanta, GA 30319

TITLE D ☐ Delete
NAME BAUGH, ROY
STREET ADDRESS 17 AUGUST AVE DRIVE
CITY ST ZIP BROWNSBURG IN 46112

TITLE D ☐ Change ☒ Addition
NAME Donna Flower
STREET ADDRESS 1476 Calhoun St
CITY ST ZIP New Orleans, LA 70118

TITLE SD ☒ Delete
NAME BRATTON, LYNN
STREET ADDRESS 4737 CLOUD LANE
CITY ST ZIP BIRMINGHAM AL 35243

TITLE D ☐ Change ☒ Addition
NAME Wayne Dawson
STREET ADDRESS P.O. Box 15787
CITY ST ZIP Hattiesburg, MS 39404

TITLE VP ☐ Delete
NAME KIRBY, DOUG
STREET ADDRESS 2400 Bucal Vista Street
CITY ST ZIP PENSACOLA FL 32503

TITLE D ☐ Change ☒ Addition
NAME Mary Coral Murphree
STREET ADDRESS 1313 SIERRA BLVD S.E.
CITY ST ZIP HUMSVILLE, AL 35801

TITLE SD ☐ Delete
NAME WILSON, SANDRA
STREET ADDRESS 1 THE OAKS CIRCLE
CITY ST ZIP BIRMINGHAM AL 35244

TITLE D ☐ Change ☒ Addition
NAME Bill McGehee
STREET ADDRESS 1313 Sierra Blvd SE
CITY ST ZIP Huntsville, AL 35801

TITLE TD ☐ Delete
NAME JONES, GLEN
STREET ADDRESS 4921 NEW PROVIDENCE AVE
CITY ST ZIP TAMPA FL 33629

TITLE D ☐ Change ☒ Addition
NAME Rodney C. Richardson
STREET ADDRESS P.O. Box 1947
CITY ST ZIP Meridian, MS 39302

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-28-07

Daytime Phone