

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 757840

**FILED**  
**Jan 15, 2013**  
**Secretary of State**  
**CC5374436196****Entity Name:** THE BREAKERS OF FORT WALTON BEACH CONDOMINIUMS,  
INC.**Current Principal Place of Business:**215 GRAND BLVD.  
MIRAMAR BEACH, FL 32550**Current Mailing Address:**215 GRAND BLVD.  
MIRAMAR BEACH, FL 32550 US**FEI Number: 59-2625097****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.  
BECKER & POLIAKOFF, P.A.  
348 MIRACLE STRIP PKWY SW, SUITE 7  
FORT WALTON BEACH, FL 32548 US*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**Officer/Director Detail :**

Title	PRESIDENT
Name	KINDLEY, LYNN
Address	215 GRAND BLVD
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	SECRETARY
Name	SCHOEPPNER, KAY
Address	215 GRAND BLVD.
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	TREASURER
Name	MARTINDALE, CHET
Address	215 GRAND BLVD.
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	VP
Name	CARLSON, ACE
Address	215 GRAND BLVD.
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	DIRECTOR
Name	BEERY, JACK
Address	215 GRAND BLVD.
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	DIRECTOR
Name	MERI-AKRI, ALEX
Address	215 GRAND BLVD.
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	DIRECTOR
Name	SALAZAR, JOE
Address	215 GRAND BLVD.
City-State-Zip:	MIRAMAR BEACH FL 32550

*I hereby 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 all other like empowered.*

**SIGNATURE: LYNN KINDLEY****DP****01/15/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date