#### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002428

Entity Name: ARIEL DUNES CONDOMINIUM OWNERS ASSOCIATION, INC.

FILED
Jan 22, 2018
Secretary of State
CC9970191818

# **Current Principal Place of Business:**

215 GRAND BLVD SUITE 200

MIRAMAR BEACH, FL 32550

# **Current Mailing Address:**

215 GRAND BLVD STE 200

MIRAMAR BEACH, FL 32550 US

FEI Number: 90-0313898 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

DUNLAP & SHIPMAN, P. A. 2063 S. CTY. HWY. 395 SANTA ROSA BEACH, FL 32459 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: DAVID H. MILAM 01/22/2018

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

TitleVPTitleDIRECTORNameD'SILVA, SHERINameKLINE, KEITH

Address 100 VISTA BLUFFS BLVD. Address 302 HOLLY STREET

City-State-Zip: DESTIN FL 32541 City-State-Zip: DESTIN FL 32541

Title SECRETARY Title D

NameDYBAS, DINAHNameELDRIDGE, KENNETHAddress12071 TEXAS HIGHWAYAddress1003 CHESHIRE LANECity-State-Zip:MANY LA 71449City-State-Zip: HOUSTON TX 70018

Title PRESIDENT Title DIRECTOR

Name BLACKWELL, RICK Name LARSON, TROY

Address 10031 ISSABELLA LANE Address 112 SEASCAPE BLVD.

City-State-Zip: HAMMOND LA 70403 City-State-Zip: MIRAMAR BEACH FL 32550

Title DIRECTOR

Name WESTMORELAND, BLAKE

Address 315 IDLE PINES
City-State-Zip: PERRY GA 31069

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: RICK BLACKWELL PRESIDENT 01/22/2018