## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05993

Entity Name: THE COMMODORE OWNERS ASSOCIATION, INC.

FILED
Mar 28, 2013
Secretary of State
CC8040965246

**Current Principal Place of Business:** 

4715 THOMAS DRIVE

PANAMA CITY BEACH, FL 32408

**Current Mailing Address:** 

4715 THOMAS DRIVE

PANAMA CITY BEACH, FL 32408 US

FEI Number: 59-2502838 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SLOAN, TIMOTHY J P.A. 427 MCKENZIE AVENUE PANAMA CITY, FL 32402 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: TIMOTHY J. SLOAN 03/28/2013

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title VP

Name DAVIS, LEE Name ADAMS, BILL

Address 4715 THOMAS DR., 1007 Address 4715 THOMAS DR. #608

City-State-Zip: PANAMA CITY BEACH FL 32408 City-State-Zip: PANAMA CITY BEACH FL 32408

Title T Title D

Name MEADOR, DOUG Name KING, GEORGE

Address 4715 THOMAS DRIVE #709 Address 160 FORTVILLE ROAD

City-State-Zip: PANAMA CITY BEACH FL 32408 City-State-Zip: GRAY GA 31032

Title D Title D

Name EZELL, GEORGETTE Name MYERS, CAROLINE

Address 4715 THOMAS DRIVE Address 2455 CRAIGSTON DRIVE

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City-State-Zip: PANAMA CITY REACH EL 32408 City-State-Zip: COLUMBUS GA 31906

City-State-Zip: PANAMA CITY BEACH FL 32408 City-State-Zip: COLUMBUS GA

Title D

Name CLARK, PANSY

Address 1537 VICTORIA WOOD DRIVE

City-State-Zip: HIAWASSEE GA 30546

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 S. WALLS SECRETARY 03/28/2013