

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

01-08-2007 90248 027 \*\*\*\*70.00

720212

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 FEB 07 PM 2:16

DOCUMENT # 720212

1. Entity Name  
EL MATADOR ASSOCIATION, INC.



Principal Place of Business  
909 SANTA ROSA BLVD.  
FORT WALTON BEACH, FL 32548

Mailing Address  
909 SANTA ROSA BLVD.  
FORT WALTON BEACH, FL 32548

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

01052007

Chg-NP

CR2E037 (12/06)

4. FEI Number  
59-1407262

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

NEWMAN, RAYMOND F JR  
348 MIRACLE STRIP PARKWAY SW  
SUITE 7  
FT. WALTON BEACH, FL 32548

Name

Street Address (P.O. Box Number is Not Acceptable)

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

Filing 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  
NAME HERRING, JOHN J ☒ Delete  
STREET ADDRESS 909 SANTA ROSA BLVD. # 231  
CITY-ST-ZIP FORT WALTON BEACH, FL 32548

TITLE PD  
NAME Gloria Turner ☐ Change ☒ Addition  
STREET ADDRESS 865 Grande CT  
CITY-ST-ZIP Shalimar, FL 32579

TITLE VD  
NAME WILLIAMS, JOHN ☒ Delete  
STREET ADDRESS 219 S MASSACHUSETTS STREET  
CITY-ST-ZIP COVINGTON, LA 70433

TITLE VD  
NAME Dan Cartledge ☐ Change ☒ Addition  
STREET ADDRESS 314 Bedford Ave  
CITY-ST-ZIP Hoover, AL 35226

TITLE TD  
NAME GARNER, TERRY ☒ Delete  
STREET ADDRESS 321 YACHT CLUB DR.  
CITY-ST-ZIP FORT WALTON BEACH, FL 32548

TITLE TD  
NAME Jack Herring ☐ Change ☒ Addition  
STREET ADDRESS 909 Santa Rosa Blvd #231  
CITY-ST-ZIP Ft. Walton Beach, FL 32548

TITLE SD  
NAME CARTLEDGE, DAN ☒ Delete  
STREET ADDRESS 314 BEDFORD AVE.  
CITY-ST-ZIP HOOVER, AL 35226

TITLE SD  
NAME Dave Hancock ☐ Change ☒ Addition  
STREET ADDRESS 909 Santa Rosa Blvd #139  
CITY-ST-ZIP Ft. Walton Beach, FL 32548

TITLE D  
NAME MORRIS, IRVIN ☒ Delete  
STREET ADDRESS 200 PINECREST DR.  
CITY-ST-ZIP PARAGOULD, AZ 72450

TITLE D  
NAME Max Trainer ☐ Change ☒ Addition  
STREET ADDRESS 767 Blvd of Champions  
CITY-ST-ZIP Shalimar, FL 32579

TITLE GM  
NAME SIMMONS, VICKI ☒ Delete  
STREET ADDRESS 900 ROANOKE COURT  
CITY-ST-ZIP FORT WALTON BEACH, FL 32547

TITLE GM  
NAME James H Averill ☐ Change ☒ Addition  
STREET ADDRESS 706 Turnberry Cove  
CITY-ST-ZIP Niceville, FL 32578

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Gloria Turner  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-05-07 850-244-8606  
Date Daytime Phone #