2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734530

FILED Apr 29, 2006 Secretary of State

Entity Name: THE AEGEAN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

520 GULF SHORE DR. 520 GULF SHORE DR. DESTIN, FL 32541 DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

520 GULF SHORE DR. 215 GRAND BLVD

SUITE 200 DESTIN, FL 32541

MIRAMAR BEACH, FL 32550 US

FEI Number: 59-1647316 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GREEN, LORI GORMLEY, TERRY P 215 GRAND BLVD 520 GULF SHORE DR.

DESTIN, FL 32541 SUITE 200

MIRAMAR BEACH, FL 32550 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: TERRY P GORMLEY 04/29/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

JORDAN, RICK ZETTLER, LYNN Name: Name: 555 MASON ROAD SOUTH Address: 11142 ST CHARLES PL Address: City-St-Zip: SAINT LOUIS, MO 63141 City-St-Zip: CARMEL, IN 46033 US

Title: () Delete Title: DV (X) Change () Addition STUART, JAMES JR. Name: JORDAN, RICK Name:

Address: 5472 KAYWOOD DR. Address: 555 MASON RD S City-St-Zip: JACKSON, MS 39211 City-St-Zip: ST LOUIS, MO 63141 US

Title: () Delete Title: DST (X) Change () Addition

NIX, JAMES JR CRAFT, MICHAEL Name: Name: 2668 LAKE CIRCLE Address: Address: 4640 FAIRFIELD AVE City-St-Zip: JACKSON, MS 39211 City-St-Zip: SHREVEPORT, LA 71106 US

Title: () Delete Title: D (X) Change () Addition

Name: COOK, RALPH Name: STUART, JIM Address: 4041 GREYSTONE DR. Address: 5472 KAYWOOD DR City-St-Zip: BIRMINGHAM, AL City-St-Zip: JACKSON, MS 39211 US

Title: CPD () Delete Title: (X) Change () Addition

FERGUSON, WEBA NIX, JIMMY Name: Name: 3638 LYLES DR. 2668 LAKE CIR Address: Address: JACKSON, MS 39211 US City-St-Zip: OXFORD, MS City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MICHAEL CRAFT DST 04/29/2006

Electronic Signature of Signing Officer or Director

Date