# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 01, 2005**
**Secretary of State**

DOCUMENT# 743531

**Entity Name:** FORT WALTON BEACH VISTA DEL MAR CONDOMINIUMS ASSOCIATION, INC.

**Current Principal Place of Business:**

925 WHELK COURT
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

3871 INDIAN TRAIL #1F
DESTIN, FL 32541

**New Mailing Address:**

P.O. BOX 8053
FORT WALTON BEACH, FL 32548

**FEI Number: 59-2070449** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

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

HEBERT, MARSHELL
217 MCARTHUR AVE.
FT. WALTON BEACH, FL 32548 US

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

HEBERT, MARSHELL
925 WHELK COURT
UNIT #1
FT. 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: _____ 05/01/2005
Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete
Name: HEBERT, FRANCIS
Address: 217 MC ARTHUR AVENUE
City-St-Zip: FT. WALTON BEACH, FL

Title: VPD ( ) Delete
Name: GILLUM, WANDA
Address: P.O. BOX 442
City-St-Zip: DEMOREST, GA 30535

Title: PD ( ) Delete
Name: REMELE, CINDY
Address: 925 WHELK COURT #6
City-St-Zip: FORT WALTON BEACH, FL 32548

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

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CINDY REMELE PD 05/01/2005
Electronic Signature of Signing Officer or Director — Date