## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 746755**

FILED Feb 18, 2005 Secretary of State

Entity Name: FORT WALTON BEACH GULF WINDS CONDOMINIUM ASSOCIATION, INC.

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

307 BARRACUDA AVENUE 307 BARRACUDA AVENUE

P.O. BOX 4583 FORT WALTON BEACH, FL 32548

Current Mailing Address: New Mailing Address:

307 BARRACUDA AVENUE 406 RIDGEWOOD CIRCLE

P.O. BOX 4583 DESTIN, FL 32541 FT WALTON BEACH, FL 32549

FEI Number: 59-2384021 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:

GRIM, DARLEEN M.

2801 JERRY PATE COURT

SHALIMAR, FL 32579 US

CUNNINGHAM, BARBARA M MRS
406 RIDGEWOOD CIRCLE
DESTIN, FL 32541 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: BARBARA M. CUNNINGHAM 02/18/2005

Electronic Signature of Registered Agent Date

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

 Title:
 PD () Delete
 Title:
 VP (X) Change () Addition

 Name:
 GRIM, DARLEEN M.,
 Name:
 PARKHURST, ANGELA MS

 Address:
 2801 JERRY PATE COURT
 Address:
 676 SANTA ROSA BLVD APT NO

 City-St-Zip:
 SHALIMAR, FL 32579
 City-St-Zip:
 FT WALTON BEACH, FL 325458

Title: STD () Delete Title: (X) Change ( ) Addition GRIM, HARRY J., Name: CUNNINGHAM, ROBERT E DR Name: Address: 2801 JERRY PATE COURT Address: 406 RIDGEWOOD CIRCLE City-St-Zip: SHALIMAR, FL 32579 City-St-Zip: DESTIN, FL 32541

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

 Name:
 ENSLEY, ERIC
 Name:
 COZZI, DONA M MS

 Address:
 316 EAST WILLAMETTE AVE.
 Address:
 326 SAILFISH CIRCLE

 City-St-Zip:
 COLORADO SPRINGS, CO 80903
 City-St-Zip:
 DESTIN, FL 32541

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: ROBERT E. CUNNINGHAM P 02/18/2005