


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004 8:00 am
Secretary of State

01-15-2004 90004 016 ****61.25

DOCUMENT # 754762			
1. Entity Name SEA PALM OF FWB CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 300 MIRACLE STRIP PARKWAY S.W. FT. WALTON BEACH, FL 32548		Mailing Address 300 MIRACLE STRIP PARKWAY S.W. FT. WALTON BEACH, FL 32548	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01122004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2157750

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	
BENJAMIN BARRANCO 12 FERRY ROAD 300 MIRACLE STRIP PKWY #1D FT. WALTON BCH, 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, 2004**

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	VPD	<input type="checkbox"/> Delete		TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WILSON, KATHLEEN K			NAME	Wilson, Kathleen		
STREET ADDRESS	300 MIRACLE STRIP PKWY 26			STREET ADDRESS	300 Miracle Strip Pkwy 2C		
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548			CITY-ST-ZIP	Fort Walton Beach, FL 32548		
TITLE	PD	<input checked="" type="checkbox"/> Delete		TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PAGLIARI, EMIL			NAME	Todd Fullington		
STREET ADDRESS	300 MIRACLE STRIP PKWY 2B			STREET ADDRESS	300 Miracle Strip Pkwy 2F		
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548			CITY-ST-ZIP	Fort Walton Beach, FL 32548		
TITLE	VP	<input checked="" type="checkbox"/> Delete		TITLE	BM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MUNN, RAY			NAME	Geraldine Mattson		
STREET ADDRESS	300 MIRACLE STRIP PKWY 5H			STREET ADDRESS	1901 Melrose		
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548			CITY-ST-ZIP	Madison, WI 53704		
TITLE	BDM	<input checked="" type="checkbox"/> Delete		TITLE	BM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PEARSON, LAURIE			NAME	Mike Gillerand		
STREET ADDRESS	300 MIRACLE STRIP PKWY 2D			STREET ADDRESS	300 Miracle Strip Pkwy 2B		
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548			CITY-ST-ZIP	Fort Walton Beach, FL 32548		
TITLE	STD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BARRANCO, BEN			NAME			
STREET ADDRESS	300 MIRACLE STRIP PKWY 1D			STREET ADDRESS			
CITY-ST-ZIP	FT WALTON BCH, FL			CITY-ST-ZIP			
TITLE	BMD	<input checked="" type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KIMBALL, CHANCE			NAME			
STREET ADDRESS	106 METHODIST AVE SE			STREET ADDRESS			
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548			CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

[Handwritten Signature]

[Handwritten Signature]

[Handwritten Signature]