
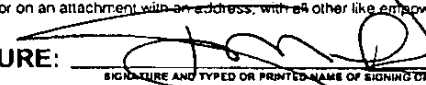


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

8/21/2006-90005-044-\$35.00-\$35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 SEP 20 PH 3:53

<b>DOCUMENT # 756704</b>			
1. Entity Name YARDARM CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 600 YARDARM DRIVE APOLLO BCH, FL 33572 US		Mailing Address 600 YARDARM DRIVE APOLLO BCH, FL 33572 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
FISCHER, MELODY 660 YARDARM DRIVE APOLLO BEACH, FL 33572		Name TROY MACDONALD Street Address (P.O. Box Number is Not Acceptable) 606 YARDARM DRIVE City APOLLO BEACH FL Zip Code 33572	
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 TROY MACDONALD		DATE AUGUST 2006	
<small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)</small>			
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 NAME STREET ADDRESS CITY-ST-ZIP	VPD CARTWRIGHT, STEVEN 604 YARDARM DRIVE APOLLO BEACH, FL 33572 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILLIAM J. RUDOLPH 616 YARDARM DRIVE APOLLO BEACH, FL 33572 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEIERS, STEVE 638 YARDARM DR. APOLLO BEACH, FL 33572 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>STROY MACDONALD</del> TROY MACDONALD 606 YARDARM DRIVE APOLLO BEACH, FL 33572 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FISCHER, MELODY 600 YARDARM DRIVE APOLLO BEACH, FL 33572 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOM JORDAN 6706 VALRIE LANE REVERVIEW AVE FL 33569 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CARTER, STEVEN B. 600 YARDARM DRIVE APOLLO BEACH, FL 33572 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JUDITH CALLIHAN 2996 JEFFERSON ST GIRARD, OH 44420 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MICHALEC, RICHARD 600 YARDARM DRIVE APOLLO BEACH, FL 33572 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500090263745 09/28/06--01041--004 **26.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 an other like empowered.			
SIGNATURE: 		TROY MACDONALD AUGUST 2006	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	



07102006 Chg-NP CR2E037 (4/06)

4. FEI Number 59-2197563 Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

SIGNATURE: TROY MACDONALD AUGUST 2006