

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 06, 2002 8:00 am**  
**Secretary of State**

03-06-2002 90106 006 \*\*\*\*61.25

**DOCUMENT # 757840**

1. Entity Name  
**THE BREAKERS OF FORT WALTON BEACH CONDOMINIUMS, INC.**

Principal Place of Business <b>381 SANTA ROSA BLVD.          FORT WALTON BEACH FL 32548          US</b>	Mailing Address <b>381 SANTA ROSA BLVD.          FORT WALTON BEACH FL 32548          US</b>
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State



DO NOT WRITE IN THIS SPACE

City & State	City & State	4. FEI Number <b>59-2625097</b>	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  
**CHESSER, D. MICHAEL  
 CHESSER, WINGARD, BARR & FLEET, P.A.  
 1201 EGLIN PARKWAY  
 SHALIMAR FL 32579**

7. Name and Address of New Registered Agent  
 Name  
**Raymond E. Newman, Jr.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**Becker & Poliakoff, P.A.  
 348 Miracle Strip Parkway S.W. Suite 7**  
 City  
**Fort Walton Beach FL 32548**

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.  
 SIGNATURE: *[Signature]* DATE: **2-20-02**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME D JOHNSON, ROBERT E STREET ADDRESS 9647 BAYVIEW COURT CITY-ST-ZIP INDIANAPOLIS IN 46256	<input type="checkbox"/> Delete
TITLE NAME D BOYETTE, WAYNE STREET ADDRESS 381 SANTA ROSA BLVD CITY-ST-ZIP FORT WALTON BEACH FL 32548	<input type="checkbox"/> Delete
TITLE NAME TD BLANTON, DON STREET ADDRESS 202 BRANCH LANE CITY-ST-ZIP MANDEVILLE LA 70448	<input type="checkbox"/> Delete
TITLE NAME VD KROST, KENNETH STREET ADDRESS 4439 WINDWARD LANE COVE CITY-ST-ZIP NICEVILLE FL 32578	<input type="checkbox"/> Delete
TITLE NAME SD EDWARDS, NOEL STREET ADDRESS 2831 PLAYERS DRIVE CITY-ST-ZIP JONESBORO GA 30238	<input type="checkbox"/> Delete
TITLE NAME PD RALL, FRED STREET ADDRESS 381 SANTA ROSA BLVD. CITY-ST-ZIP FORT WALTON BEACH FL 32548	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME VD JOHNSON, ROBERT E. STREET ADDRESS 9647 BAYVIEW COURT CITY-ST-ZIP INDIANAPOLIS IN 46256	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME D UMHOLTZ, BARBARA STREET ADDRESS 381 SANTA ROSA BLVD C208 CITY-ST-ZIP FT WALTON BEACH, FL 32548	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME D KROST, KENNETH STREET ADDRESS 4439 WINDWARD LANE COVE CITY-ST-ZIP NICEVILLE, FL 32578	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME  STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: *[Signature]* **Frederick A. Rall** DATE: **2/19/02** PHONE: **850-244-9127**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)

Attachment  
# 757840

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 - continued

TITLE: V (non voting)  
VICKREY, GARY  
41 MY WAY

ADDITION

419195

SANTA ROSA BEACH, FLORIDA 32459