## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Feb 09, 2006 8:00 am **Secretary of State DOCUMENT # 760859** 1. Entity Name 02-09-2006 90021 040 \*\*\*\*61.25 TROPICAL BREEZE RESORT ASSOCIATION, INC. Principal Place of Business Mailing Address 17001 W FRONT BEACH RD 17001 W FRONT BEACH RD PANAMA CITY BEACH FL 32413 PANAMA CITY BEACH FL 32413 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2780752 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ISLER, CHARLES S Street Address (P.O. Box Number is Not Acceptable) 434 MAGNOLIA AVE PANAMA CITY FL 32401 City 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 3.4 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PΩ TITLE ☐ Delete TITLE ☐ Change ▼ Addition HALL, JOHN J III NAME NAME Paul Tappana 6644 VETERANS MEM. PKWY STREET ADDRESS STREET ADDRESS 5410 West Redbud Street LANCT AL CITY-ST-ZIP CITY-ST-ZIP Rogers, AR 72758 Delete TITLE TITLE ☐ Change X Addition WILLIAMS, GEORGE E NAME NAME Jim Tate 4825 PINE AVE. STREET ADDRESS STREET ADDRESS 1 Penn Lane YOUNGSTOWN FL CITY-ST-ZIP CITY+ST-ZIP <del>Bella Vista, AR 72714</del> ☐ Change TITLE ☐ Detete 🔀 Addition NAME NAME BELLVILLE, SUZANNE Debbie Nichols STREET ADDRESS 79 GLEN FOREST TRAIL STREET ADDRESS 1308 NE 10th St. CITY-ST-ZIP NEWNAN GA 30265 CITY-ST-ZIP Bentonville, AR 72712 TD ☐ Change fift) F ☐ Detete TITLE Addition JACKSON, JAMES Q NAME NAME Tom Reddin STREET ADDRESS 1756 W. ACARIBACA TRAIL S.E. STREET ADDRESS 2 Glamis Circle CITY-ST-ZIP ATLANTA GA CITY-ST-ZIP Bella Vista AR 72714 D ☐ Delete Change Addition AUSTIN, TOM NAME NAME 2620 TULIP TREE CIRCLE STREET ADDRESS STREET ADDRESS SEFFNER FL 33584

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 in the corporation of 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 George & Williams - VP if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

Delete

11) Murae SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

NAME

SD

SCHIPPER, HENRY

SUNNYSIDE FL 32413

PO BOX 404

FILED

850-727 -4678

Change

☐ Addition