

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764111

FILED
May 01, 2010
Secretary of State

Entity Name: WALTON COUNTY TAXPAYERS ASSOCIATION, INC.

Current Principal Place of Business:

121 FAIRWAY DRIVE
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

P O BOX 1085
SANTA ROSA BCH, FL 32459

New Mailing Address:

FEI Number: 59-2252624 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HUDSON, ROBERT L
121 FAIRWAY DRIVE
SANTA ROSA BEACH, FL 32459 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HUDSON, ROBERT L
Address: 121 FAIRWAY DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: S
Name: D'AUTILIA, ELLA
Address: PO BOX 1608
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D
Name: RYAN, RICHARD
Address: 233 FAIRWAY DR
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D
Name: LAWSON, HILTON
Address: 423 HIDDEN LAKE TRAIL
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: T
Name: NIELSON, MARY L
Address: 613 RIDGE ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

I hereby 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 all other like empowered.

SIGNATURE: ROBERT L HUDSON

P

05/01/2010

Electronic Signature of Signing Officer or Director

Date