2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 02, 2004 8:00 am
Secretary of State
08-02-2004 90019 034 ****61.25

DOCUMENT # 764724

1. Entity Name

LAMER CONDOMINIUM ASSOCIATION OF N.W. FLORIDA, INC.

Principal Place of Business	Mailing Address
P.O. BOX 34116 PENSACOLA FL 32507	P.O. BOX 34116 PENSACOLA FL 32507

MOORE CR2E037 (4/04)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2286381 ☐ 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
NALDONY, REBECCA J 14180 PERDIDO KEY DR STE 3 PENSACOLA FL 32507	Name: Nadolny, Rebecca J Street Address (P.O. Box Number is Not Acceptable): 16780 Perdido Key Dr. #E704 City: Pensacola FL Zip Code: 32507

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: Rebecca J Nadolny 7/27/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By September 8, 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P KRUSE, BOB 5803 GRINER ROAD SE HUNTSVILLE AL 35802	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLINE, CINDY 192 PINE BREEZE RD. COLUMBUS MS 39702	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARTLETTE, SUZANNE 14009 PERDIDO KEY DR., #213 PENSACOLA FL 32507	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP FANELLA, JOHN 388 PALM LAKE DR PENSACOLA FL 32507	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST WOOD, MARC 991 SHELTON SHORE DR TALLADEGA AL 35160	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Frances Duncan 863 Gandy Ln. Centaurus FL 32533 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AVERY, THOMAS G 4636 SOUTH LAKESIDE DR BIRMINGHAM AL 35244	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Avery, Thomas G 4686 South Lakeside Dr. Birmingham AL 35244 ☒ Change ☐ 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] 7/29/04 850-492-2166
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #