

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

**FILED**  
**Apr 05, 2006 8:00 am**  
**Secretary of State**

04-05-2006 90155 050 \*\*\*\*61.25

**DOCUMENT # 765527**

1. Entity Name

THE NAUTILUS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

NAUTILUS CONDOMINIUM  
14721 PERDIDO KEY DR.  
PENSACOLA FL 32507  
US

Mailing Address

1088 CANDLEWOOD CIRCLE  
PENSACOLA FL 32514-1604  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2239658

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

BRYAN, SARAH  
1088 CANDLEWOOD CIRCLE  
PENSACOLA FL 32514

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 re-registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

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

TITLE PD ☐ Delete  
NAME VICKERY, CHARLES  
STREET ADDRESS 419 PLANTAIN TERRACE  
CITY-ST-ZIP PEACHTREE CITY GA 30269

TITLE VD ☐ Delete  
NAME RICHARDSON, DAVID  
STREET ADDRESS 505 6TH AVE.  
CITY-ST-ZIP HATTIESBURG MS 39401

TITLE SD ☒ Delete  
NAME BEUMER, BRENDA  
STREET ADDRESS 12518 GULF BEACH WAY  
CITY-ST-ZIP PENSACOLA FL 32507

TITLE D ☐ Delete  
NAME BRYAN, SARAH  
STREET ADDRESS 1088 CANDLEWOOD CIR.  
CITY-ST-ZIP PENSACOLA FL 32514

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☒ Change ☐ Addition  
NAME HINSON, HUGH  
STREET ADDRESS 3304 FOREST GLEN DR. S.W.  
CITY-ST-ZIP DECATUR, AL 35603

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sarah C. Bryan

SARAH BRYAN

3/27/2006

850 476 7497