

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 768650

**FILED**  
**Jan 12, 2010**  
**Secretary of State**

**Entity Name:** NAUTICAL WAY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

204 GULF WINDS CT  
DESTIN, FL 32541 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1262  
DESTIN, FL 325401262 US

**New Mailing Address:**

**FEI Number:** 59-2406049

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROGERS, DONALD H  
204 GULF WINDS CT  
DESTIN, FL 32541 US

**Name and Address of New Registered Agent:**

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: PD  
Name: SCHWARZE, ROBERT  
Address: 106 GULF WINDS CT  
City-St-Zip: DESTIN, FL 32541

Title: D  
Name: ROGERS, DON  
Address: 204 GULF WINDS CT  
City-St-Zip: DESTIN, FL 32541

Title: TD  
Name: LEWIS, RAY  
Address: 201 GULF WINDS CT  
City-St-Zip: DESTIN, FL 32541

Title: VD  
Name: HOLLIS, STEVE  
Address: 102 GULF WINDS CT  
City-St-Zip: DESTIN, FL 32541 US

Title: DS  
Name: SIMPSON, MARK  
Address: 111 GULF WINDS CT  
City-St-Zip: DESTIN, FL 32541 US

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: DONALD H. ROGERS

RA

01/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date