

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Sep 11, 2006 8:00 am
Secretary of State

07-24-2006 90007 001 ****61.25

DOCUMENT # 770741 1. Entity Name PARADISE POINT TOWNHOMES OWNERS' ASSOCIATION, INC., OF NAVARRE BEACH, FLORIDA					
Principal Place of Business P.O. BOX 5044 NAVARRE, FL 32566			Mailing Address 7324 ROYAL OAK FORT WORTH, TX 76126 US		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address 1440 PARADISE POINT Blvd APT. # 5 NAVARRE BEACH FL 32566			
4. FEI Number 59-3556265		Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ROSALEZ, CARIE L 6776 PERCH STREET NAVARRE, FL 32566			7. Name and Address of New Registered Agent Name DIANA BEAM Street Address (P.O. Box Number is Not Acceptable) 3045 RANNEY DRIVE City NAVARRE FL Zip Code 32566		
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 DIANA BEAM <i>Diana Beam</i> DATE 7-17-06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$81.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOX, MICHAEL 7324 ROYAL OAK FT WORTH, TX 76126	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOYD, TONY 925 HOLSTON AVE BRISTOL, TN 37630	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VEAL, ANGELA 10 ROYAL PALM MARY ESTHER, FL 32569	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ELLIOTT, JOHN 107 WILLING STREET MILTON, FL 32570	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Joe Reid 1440 PARADISE POINT BLVD, #5 NAVARRE BEACH, FL 32566	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Shirley Irwin 8668 NAVARRE PARKWAY BOX 114 NAVARRE FL. 32566	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Shirley Irwin 8668 NAVARRE PARKWAY BOX 114 NAVARRE FL. 32566	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Sharon Bonner 75 Brookview PLACE OXFORD, GA. 30054	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 or without like empowered.					
SIGNATURE: <i>Joe Reid</i>		Date 7-17-06 Phone 850-936-0622			