## 2006 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT**

## **DOCUMENT # N00000005882**



Apr 25, 2006 8:00 am Secretary of State

1. Entity Name THE GARDENS AT SPANISH TRAIL CONDOMINIUM ASSOCIATION, INC.								04-25-2	006 9010	9 014 '	****61.2	:5
Principal Place of Business 3298 SUMMIT BLVD. STE 4 PENSACOLA, FL 32503		3298 STE -	Mailing Address 3298 SUMMIT BLVD. STE 4 PENSACOLA, FL 32503				- <i>Τ</i> ΩΛΡΤΟΩ:					
2. Princip	al Place of Business	3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.					04192006	Chg-NF	, (	CR2E037	' (11/05)	
City & State		City & State			· · · · · · · · · · · · · · · · · · ·		4. FEI Numb 59-369				<del></del>	oplied For
Zip	Zip Country Z		p Cou		untry		5. Certificate	of Status D	esired		8.75 Add	litional
<del></del>	6. Name and Address of Curren	t Registere	nd Agent				7. Name and	Address o	of New Regi			
					Name						_	
ETHERIDGE, RAY O 3298 SUMMIT BLVD.			Street Address			vddress (i	P.O. Box Numb	er is Not Ad	ceptable)			
STE 4	COLA, FL 32503											
	,				City					FL	Zip Cod	e
	ove named entity submits this statement	or the purp	ose of changing its	register	ed office o	r register	ed agent, or bo	th, in the St	ate of Florid	a. I am fa	miliar with,	and accept
III OL	ligations of registered agent.											
SIGNATU		n and title if and	MOTE (MOTE	- Registers	ed Ament sinner	ture recuired	when reinstation)			DATE	· · · · · · · · · · · · · · · · · · ·	
SIGNATU	Signature, typed or printed name of registered agor	nt and title if app		····		ture required	when reinstating)			DATE		
SIGNATU		nt and title if app	9. Election Can Trust Fund C	npaign F	inancing	ture required	\$5.00 May E Added to Fees			e check	payable to	
SIGNATU	Signature, typed or printed name of registered agor		9. Election Can Trust Fund C	npaign F	inancing		\$5.00 May 6	·	Florida	e check Departi	ment of S	tate i 10
10.	Signature, typed or printed name of registered agor Filling Fee is \$61.25 Due by May 1, 2006  OFFICERS AND D		9. Election Can Trust Fund C	npaign F Contribut	inancing ion.		\$5.00 May B Added to Fees ADDITIONS/CH	IANGES TO	Florida OFFICERS	e check Departs	ment of S	tate
10. TITLE NAME	Signature, typed or printed name of registered agor  Filling Fee is \$61.25  Due by May 1, 2006  OFFICERS AND D  TD  RICHMOND, JAY		9. Election Can Trust Fund C	npaign F Contribut 11.	Financing ion. E		\$5.00 May B Added to Fees ADDITIONS/CH	IANGES TO	Florida OFFICERS	e check Departs	ment of S	tate i 10
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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 all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

Q 57-434-3185