

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# N00000008211

Entity Name: PRESTWICK PLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

New Mailing Address:

FEI Number: 59-3698635 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORMLEY, TERRY P
215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 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: D () Delete
Name: SMITH, BRAD
Address: 3113 WYNBROOKE CIR
City-St-Zip: LOUISVILLE, KY 40241 US

Title: DP () Delete
Name: MANNES, ROBERT
Address: 4098 HERON CREEK TRAIL
City-St-Zip: HOLLAND, MI 49423 US

Title: D () Delete
Name: MURRELL, CHARLES
Address: 3828 TIMBERLAINE WAY
City-St-Zip: BIRMINGHAM, AL 35243 US

Title: DST () Delete
Name: LOSSON, KAY
Address: 8865 WILLOWBRAE LANE
City-St-Zip: ROSWELL, GA 30076 US

Title: DV () Delete
Name: POTTS, TOM
Address: 315 BELLE LANE
City-St-Zip: SAPULPA, OK 74066 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STONE, JAY
Address: 1126 PRESTWICK PLACE
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: DP (X) Change () Addition
Name: MANNES, ROBERT
Address: PO BOX 1918
City-St-Zip: HOLLAND, MI 494221918 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KAY LOSSON

DST

04/30/2006

Electronic Signature of Signing Officer or Director

Date