

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000242

FILED  
Mar 31, 2009  
Secretary of State

**Entity Name:** AVALON DUNES CONDOMINIUM OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

599 SCENIC GULF DR.  
MIRAMAR BEACH, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

50 MONACO STREET  
MIRAMAR BEACH, FL 32550

**New Mailing Address:**

546 MARY EASTHER CUT -OFF  
FORT WALTON BEACH, FL 32548

**FEI Number:** 59-3692123

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RESORTQUEST INTERNATIONAL  
ANGELA ROGERS  
50 MONANCO STREET  
MIRAMAR BEACH, FL 32550 US

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

RESORTQUEST INTERNATIONAL  
ANGELA ROGERS  
546 MARY ESTHER CUT-OFF  
FORT WALTON BEACH, FL 32548 US

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: ANGELA ROGERS

03/31/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FISHER, BOB  
Address: 3705 CLASSIC DRIVE SOUTH  
City-St-Zip: MEMPHIS, TN 38125

Title: VP ( ) Delete  
Name: DUGAS, ROLAND  
Address: 400 OAKLEAF DRIVE  
City-St-Zip: LAFAYETTE, LA 70503

Title: STD ( ) Delete  
Name: MARTIN, PAT  
Address: PO BOX 6843  
City-St-Zip: MIRAMAR BEACH, FL 32550

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: ANGELA ROGERS

MGR

03/31/2009

Electronic Signature of Signing Officer or Director

Date