## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000000242

FILED Feb 24, 2012 Secretary of State

Entity Name: AVALON DUNES CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

**New Principal Place of Business:** 

599 SCENIC GULF DR. MIRAMAR BEACH, FL 32550

**Current Mailing Address:** 

FEI Number: 59-3692123

**New Mailing Address:** 

RESORTQUEST NWFL

FEI Number Not Applicable ( )

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

546 MARY EASTHER CUT -OFF STE 3 FORT WALTON BEACH, FL 32548

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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

ANGELA ROGERS 546 MARY ESTHER CUT-OFF STE 3 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:

02/24/2012

Electronic Signature of Registered Agent

FEI Number Applied For ( )

Date

## **OFFICERS AND DIRECTORS:**

Γitle: I

Name: FISHER, BOB

Address: 3705 CLASSIC DRIVE SOUTH City-St-Zip: MEMPHIS, TN 38125

Title: VF

Name: JOHNSON, JOHN
Address: 1174 GREYSTONE CREST
City-St-Zip: BIRMINGHAM, AL 35242

Title: STD

Name: GRANTHAM, JAMES SR

Address: 599 SCENIC GULF DRIVE, UNIT 103 City-St-Zip: MIRAMAR BEACH, FL 32550

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: BOB FISHER P 02/24/2012