

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Apr 20, 2006 8:00 am
Secretary of State**

04-20-2006 90183 039 ****61.25

DOCUMENT # N01000002924

1. Entity Name
PALAFOX PIER & YACHT HARBOUR CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business
24 WEST CHASE STREET
PENSACOLA, FL 32501

Mailing Address
24 WEST CHASE STREET
PENSACOLA, FL 32501



01202006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
LOZIER, DANIEL R 24 WEST CHASE STREET PENSACOLA, FL 32501				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL	Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RUSSENBERGER, RAY D 40 SOUTH PALAFOX STREET 5TH FLOOR PENSACOLA, FL 32502	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1901 Cypress Street Pensacola, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CARR, JOHN S 601 S. PALAFOX STREET PENSACOLA, FL 32502	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 17 West Cedar Street Suite 3 Pensacola, FL 32502
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST LOZIER, DANIEL R 24 W. CHASE STREET PENSACOLA, FL 32501	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.

SIGNATURE:

John S. Carr
Vice President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/11/06 (850)434-2244

Date

Daytime Phone #