

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006763

FILED
Apr 21, 2006
Secretary of State

Entity Name: TORTUGA DUNES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

250 ESCANABA AVE
PANAMA CITY BEACH, FL 32417

New Principal Place of Business:

250 ESCANABA AVE
PANAMA CITY BEACH, FL 32413

Current Mailing Address:

P O BOX 18797
PANAMA CITY BEACH, FL 32417

New Mailing Address:

P O BOX 9344
PANAMA CITY BEACH, FL 32417

FEI Number: 29-6620327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBSON, THOMAS S
206 E 4TH ST
P O BOX 39
PORT ST JOE, FL 32457 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: PD () Delete
Name: MCLAUGHLIN, CHRISTINE L
Address: P O BOX 18797-250 ESCANABA AVE
City-St-Zip: PANAMA CITY BEACH, FL 32415

Title: D () Delete
Name: ALLEN, CARL
Address: 7933 MCELVEY RD
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D () Delete
Name: LABANOWSKI, MICHAEL
Address: 1893 GREEN RD
City-St-Zip: DOTHAN, AL 36303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCLAUGHLIN, CHRISTINE L
Address: 250 ESCANABA AVE
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: D (X) Change () Addition
Name: ALLEN, CARL
Address: 101 MONTE PALO
City-St-Zip: PANAMA CITY BEACH, FL 32413

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: CHRISTINE MCLAUGHLIN

PD

04/21/2006

Electronic Signature of Signing Officer or Director

Date