

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90305 012 ****61.25

DOCUMENT # N02000000043

1. Entity Name
SAN REMO OWNERS ASSOCIATION, INC.



Principal Place of Business
**130 SOUTH GERONIMO STREET UNIT 5
DESTIN, FL 32550**

Mailing Address
**PO BOX 1779
DESTIN, FL 32540**

60024637



2. Principal Place of Business

12815 Hwy 98 West

3. Mailing Address

Suite, Apt. #, etc.

100

City & State

Miramar Beach, FL

City & State

Zip

Country

Zip

Country

02072006

Chg-NP

CR2E037 (11/05)

4. FEI Number
94-3414743

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SMITH, LORRETTA
C/O NEWMAN DAILEY
12815 HWY 98 W, SUITE 100
MIRAMAR BEACH, FL 32550**

7. Name and Address of New Registered Agent

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
SHORES, TIMM
130 SOUTH GERONIMO STREET UNIT 5
DESTIN, FL 32550** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DST
WILLIAMS, DAVID
130 SOUTH GERONIMO STREET UNIT 5
DESTIN, FL 32550** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
WILKERSON, DEAN
1044 HIGHWAY 98 EAST SUITE 1506
DESTIN, FL 32541** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Castrino, Kenneth
P.O. Box 6061
Miramar Beach, FL 32550** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
Rau, Richard
77 White Cliffs Lane
Santa Rosa Beach, FL 32459** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
4093 Indian Trail
Destin, FL 32041** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Cason, James
2804 Azalea Place
Nashville, TN 37204** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Bell, Fred
P.O. Box 190495
Mobile, AL 36619** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/10/06

850-837-1071