## 2005 NOT-FOR-PROFIT CORPORATION

## ANNUAL REPORT **DOCUMENT # N02000001755** ASSOCIATION, INC.



**FILED** 

Mar 10, 2005 8:00 am Secretary of State 03-10-2005 90143 044 \*\*\*\*61.25 1. Entity Name NEPTUNE'S PALACE CONDOMINIUM OWNERS' Principal Place of Business Mailing Address 581 WEST GORRIE DR. 581 WEST GORRIE DR. ST. GEORGE ISLAND, FL 32328 ST. GEORGE ISLAND, FL 32328 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01282005 CR2E037 (10/03) City & State City & State 4. FEI Number Applied For 20-0418782 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Ben Ben Pridgeon
Street Address (P.O. Box Number is Not Acceptable) **BUETTNER, CHARLES** 581 WEST GORRIE DR. ST. GEORGE ISLAND, FL 32328 2518 Chamberlin Drive FL Zip Code 32308 Tallahassee 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 SIGNATURE Signature, typed or printed name of registered igent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS Wally Womble 2988 S. Lake Bradford Road TITLE ☐ Delete TITLE Addition NAME BUETTNER, CHARLES W NAME 581 WEST GORRIE DR. DP STREET ADDRESS STREET ADDRESS Tallahassee, FL 32310 CITY-ST-ZIP ST. GEORGE ISLAND, FL 32328 CITY-ST-ZIP DVS Charles W. Buettner TITLE ☐ Addition HOLLAND, ROY NAME NAME P.O. Box 424 STREET ADDRESS 2369 C.R. 437 STREET ADDRESS Eastpoint, FL 32328 CITY-ST-ZIP CULLMAN, AL 35357 CITY-ST-ZIP David Castleberry Change Waddion 2770 Highland Ridge Court D~---TITLE IMF-NAME DEMONIA, JAMES NAME POST OFFICE BOX 1013 STREET ADDRESS STREET ADDRESS Cumming, GA 30041 CITY-ST-ZIP EASTPOINT, FL 32328 CITY-ST-ZIP Ben Pridgeon 2518 Chamberlin Drive TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS Tallahessee, FL 32308 CITY-ST-ZIP CITY-ST-7IP TITLE TITLE Amy Schmeling 2518 Chamberlin Drive ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS Tallahassee, FL 32308 CITY-ST-7IP CITY-ST-ZIP Alan O'Neal TIBE THE ☐ Delete NAME NAME 2008 Sylvania Drive STREET ADDRESS STREET ADDRESS Decatur, GA 30033 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 trusted 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 TYPEDOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR