2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State
05-27-2008 90039 044 ****61.25

DOCUMENT # N02000003334

1. Entity Name
GATEWAY AT BAYTOWNE WHARF CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
9300 EMERALD COAST PARKWAY WEST SANDESTIN, FL 32550-7268	P.O. BOX 6873 DESTIN, FL 32550-1015

04082008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 90-0017855 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GLASS, ANNE 9200 BAYTOWNE WHARF BLVD STE. 337 MARKET ST. SANDESTIN, FL 32550	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 _____ 4-15-08
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, 2008

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	D BANNER, TODD 9300 EMERALD COAST PARKWAY WEST SANDESTIN, FL 325507268	☑ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	michelle Evans 9300 Emerald Coast Parkway Sandestin, fl 32550	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ARMSTRONG, ED PO BOX 99 FREEPORT, FL 32439	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WELLS, MIKE 9300 EMERALD COAST PKWY MIRAMAR BEACH, FL 32550	☑ Delete	TITLE TD NAME STREET ADDRESS CITY-ST-ZIP	Chris Garcia 9300 Emerald Coast Parkway Sandestin, FL 32550	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GLASS, ANNE 1600 WINGFIELD DRIVE BIRMINGHAM, AL 35242	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MERK, NANCY 605 AVENIDA A CAPULEO SAN CLEMENTE, CA 92672	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	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: Anne Glass Anne Glass 4-15-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #