

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02539

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Entity Name:** TOPS'L TENNIS VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

9011 HWY 98W  
MIRAMAR BEACH, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

546 MARY ESTHER CUTOFF  
STE.#3  
FORT WALTON BEACH, FL 32548 US

**New Mailing Address:**

**FEI Number:** 59-2400050      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NEWMAN, RAYMOND F  
348 MIRACLE STRIP PARKWAY  
SUITE 7  
FORT WALTON BEACH, FL 32548 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: VD  
Name: MITCHELL, JOE  
Address: 3212 MONARCH DRIVE  
City-St-Zip: HUNTSVILLE, AL 35801

Title: PD  
Name: GAMMON, PETER  
Address: 1524 SUNSET DRIVE  
City-St-Zip: SIGNAL MOUNTAIN, TN 37377

Title: SD  
Name: VICKROY, SAM JR  
Address: 57 KENSINGTON LANE  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: D  
Name: BERRES, GERALD J  
Address: 40 FOREST HILLS LANE  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: TD  
Name: BREWIS, GARY  
Address: 3313 AFTON WAY  
City-St-Zip: BIRMINGHAM, AL 35242

I hereby 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 all other like empowered.

SIGNATURE: PETER GAMMON

PD

04/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date