

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 15, 2005 8:00 am**  
**Secretary of State**

03-15-2005 90021 023 \*\*\*\*61.25

DOCUMENT # N03000001026

1. Entity Name

WILD DUNES OWNERS' ASSOCIATION, INC.



Principal Place of Business

803 BOMBAY LANE  
ROSWELL GA 30076

Mailing Address

803 BOMBAY LANE  
ROSWELL GA 30076

2. Principal Place of Business

200 SEVILLE CHASE

3. Mailing Address

200 SEVILLE CHASE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ATLANTA, GA

City & State

ATLANTA, GA

Zip

30320

Country

USA

Zip

30328

Country

USA

4. FEI Number

59-3765828

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

1st MOORE

CR2E037 (10/04)



6. Name and Address of Current Registered Agent

FRANKLIN H. WATSON, P.A.  
5365 E. CTY. HWY. 30-A, #105  
SEAGROVE BEACH FL 32459

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

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2005**

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 D ☒ Delete  
NAME TURRENTINE, KIRSTIN A  
STREET ADDRESS 803 BOMBAY LANE  
CITY-ST-ZIP ROSWELL GA 30076

TITLE D ☒ Delete  
NAME TURRENTINE, ROSS  
STREET ADDRESS 803 BOMBAY LANE  
CITY-ST-ZIP ROSWELL GA 30076

TITLE D ☒ Delete  
NAME SMITH, WILLIAM H  
STREET ADDRESS 4039 E. CTY HWY. 30-A  
CITY-ST-ZIP SEAGROVE BEACH FL 32459

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PRES. ☐ Change ☒ Addition  
NAME BUCKLE, JIM  
STREET ADDRESS 24 CHELSEA LOOP  
CITY-ST-ZIP SANTA ROSA BEACH, FLA 32459

TITLE TREASURER ☐ Change ☒ Addition  
NAME MARTIN, DANIEL  
STREET ADDRESS 200 SEVILLE CHASE  
CITY-ST-ZIP ATLANTA, GA 30328

TITLE SECRETARY ☐ Change ☒ Addition  
NAME BUCKLE, JANE  
STREET ADDRESS 24 CHELSEA LOOP  
CITY-ST-ZIP SANTA ROSA BEACH, FLA 32459

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

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 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]* TREASURER  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/05

770 512-0797

Date

Daytime Phone #