2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005 08:00 AM
Secretary of State

DOCUMENT # N03000005164

1. Entity Name
NORTHWEST FLORIDA RURAL PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1255 YOUNGBLOOD RD BAKER, FL 32531	1255 YOUNGBLOOD RD BAKER, FL 32531

01242005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3314321
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HARGROVE, BRANT
2984 WELLINGTON CICLE W
TALLAHASSEE, FL 32309

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	YOUNGBLOOD, DAVID R JR
STREET ADDRESS	31200 RIVER RD
CITY-ST-ZIP	ORANGEBEACH, AL 36561
TITLE	V
NAME	ADAMS, DINAH
STREET ADDRESS	7868 YELLOW RIVER BAPTIST CHURCH RD
CITY-ST-ZIP	BAKER, FL 32561
TITLE	D
NAME	KENNEDY, JACK
STREET ADDRESS	7188 SHERMAN KENNEDY RD
CITY-ST-ZIP	BAKER, FL 32531
TITLE	D
NAME	MCKEE, A.G.
STREET ADDRESS	598 MCKEE RD
CITY-ST-ZIP	DEFUNIAK SPRINGS, FL 32433
TITLE	D
NAME	KING, HAROLD
STREET ADDRESS	6409 MCDONALD ST
CITY-ST-ZIP	CRESTVIEW, FL 32436
TITLE	
NAME	
STREET ADDRESS	
CITY-ST ZIP	

U00000200104
01/28/05-80013-010 61.25

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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: DAVID RAY YOUNGBLOOD JR 25 JAN 2005 (251) 980-5367
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #