FILED
May 27, 2008 8:00 am
Secretary of State
05-27-2008 90039 043 ****61.25

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000008406

1. Entity Name
FISHERMAN'S VILLAGE AT BAYTOWNE WHARF CONDOMINIUM ASSOCIATION, INC.

40105057

Principal Place of Business	Mailing Address
9201 MARKET STREET SANDESTIN, FL 32550-7268	P.O. BOX 6417 MIRAMAR BEACH, FL 32550

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 20-0366381 ☐ 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
WELLS, MIKE 9300 EMERALD COAST PKWY W SANDESTIN, FL 32550-7268	Name Chris Garcia Street Address (P.O. Box Number is Not Acceptable) 9300 Emerald Coast Parkway City Sandestin FL Zip Code 32550-7268

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 ZANNER, TODD 9300 EMERALD COAST PKWY SANDESTIN, FL 32550	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Chris Garcia 9300 Emerald coast Prkwy Sandestin, FL 32550	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP WELLS, MIKE 9300 EMERALD COAST PKWY SANDESTIN, FL 32550	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Vincent BATTaglia 9300 Emerald coast parkway Sandestin, FL 32550	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS LINDLEY, MATT 9300 EMERALD COAST PKWY SANDESTIN, FL 32550	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV LANGILLE, CHRIS 9300 EMERALD COAST PKWY SANDESTIN, FL 32550	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV Brian Spencer 700 East Gout. Street Pensacola, FL 32501	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STRAAT, RUDOLPH 2163 EAGLE PATH CIRCLE HENDERSON, NV 89074	☑ 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: _____ 4-15-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #