

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007648

FILED  
Feb 10, 2012  
Secretary of State

**Entity Name:** NEWPORT HOMEOWNERS' ASSOCIATION OF OKALOOSA, INC.

**Current Principal Place of Business:**

2410 SCENIC GULF DR  
#202B  
MIRAMAR BEACH, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 9129  
MIRAMAR BEACH, FL 32550

**New Mailing Address:**

**FEI Number:** 51-0519343

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KIELACK, SHARLENE  
2410 SCENIC GULF DR  
#202B  
MIRAMAR BEACH, FL 32550 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:** D  
**Name:** MEYER, WILLIAM  
**Address:** 1527 VENICE  
**City-St-Zip:** FT WALTON BEACH, FL 32547

**Title:** PD  
**Name:** :LEON, THOMPSON  
**Address:** 1547 VENICE AVE.  
**City-St-Zip:** FORT WALTON BEACH, FL 32547

**Title:** D  
**Name:** CURLEE, DUSTIN  
**Address:** 1558 VENICE AVENUE  
**City-St-Zip:** FT WALTON BEACH, FL 32547

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:** LEON THOMPSON

D

02/10/2012

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

\_\_\_\_\_  
Date