2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

1. Entity Name HERON AT DESTIN WEST BEACH AND BAY RESORT

DOCUMENT # N04000010924



FILED May 03, 2005 8:00 am Secretary of State

05-03-2005 90120 035 ****61.25

CONDOMINIUM ASSOCIATION, INC.					16										
Principal Place of Business 1500 MIRACLE STRIP PKWY SE FT WALTON BEACH, FL 32548			Mailing Address 1500 MIRACLE STRIP PKWY SE FT WALTON BEACH, FL 32548					ŗ							
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2. Principal Place of Business			3. Mailing Address								im illi			AU B IIU	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04272005	Chg	-NP	CR	12E037	(10/03)			
City & State			City & State				4. FEI Numb	-2,	757	104	0		plied For t Applicable		
Zip	Country Country		Zip	Zip Co		y	5. Certificate of St			atus Desired					
	6. Name	and Address of Current	Registere	d Agent				7. Name and	d Addres	s of Ne	w Regist	ered Ag	jent		
SALVATORI & WOOD, P.L.					N	Name									
	IAMI TRL	N STE 330		Si			t Address (P.O. Box Number is Not Acceptable)								
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					C	City						FL	Zip Cod	B	
8. The above the obligat	gistered o	office or regis	istered	agent, or bo	oth, in the	e State of	Florida.	l am fai	miliar with,	and accept					
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SIGNATURE .		tor printed name of registered agent	and tide if app	icable. (NOTE: R	legistered Age	ent signature requ	pured wh	han reinstating)				DATE			
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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 is 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 attractment with an address, with all origing the empowered.

STANATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR