

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010924

FILED
May 01, 2007
Secretary of State

Entity Name: HERON AT DESTIN WEST BEACH AND BAY RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1500 MIRACLE STRIP PKWY SE
FT WALTON BEACH, FL 32548

New Principal Place of Business:

1324 MIRACLE STRIP PARKWAY, #L-08
FT WALTON BEACH, FL 32548

Current Mailing Address:

1500 MIRACLE STRIP PKWY SE
FT WALTON BEACH, FL 32548

New Mailing Address:

1324 MIRACLE STRIP PARKWAY, #L-08
FT WALTON BEACH, FL 32548

FEI Number: 20-2757040 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SALVATORI & WOOD, P.L.
4001 TAMIAMI TRL N STE 330
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

SHIRLEY, REESE GM
1324 MIRACLE STRIP PARKWAY, #L-08
FT WALTON BEACH, FL 32548 US

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: SHIRLEY REESE

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TOLBERT, FRED E III
Address: 1500 MIRACLE STRIP PKWY SE
City-St-Zip: FT WALTON BEACH, FL 32548

Title: DV () Delete
Name: KREUSER, WILLIAM G P
Address: 1500 MIRACLE STRIP PKWY SE
City-St-Zip: FT WALTON BEACH, FL 32548

Title: DTS () Delete
Name: BOZZA, RUTH
Address: 1500 MIRACLE STRIP PKWY SE
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HUNTER, KIRK
Address: 412 BAY OAKS
City-St-Zip: DESTIN, FL 32541

Title: DV (X) Change () Addition
Name: SULLIVAN, JOANN
Address: 2701 TRELAWNY DRIVE
City-St-Zip: CLARKSVILLE, TN 37043

Title: DTS (X) Change () Addition
Name: RAWSON, JULIE
Address: 600 LEIGH DRIVE
City-St-Zip: COLUMBUS, MS 39705

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SHIRLEY REESE

GM

05/01/2007

Electronic Signature of Signing Officer or Director

Date