

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90420 010 ****61.25

DOCUMENT # N04445

1. Entity Name
PARK PLACE CONDOMINIUM OWNERS ASSOCIATION, INC.



Principal Place of Business
**31 PARK CIR.
FT. WALTON BEACH, FL 32548 US**

Mailing Address
**110 PERRY AVE
FORT WALTON BEACH, FL 32548 US**

50013234



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04112006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-2504171

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**PARK PLACE CONDO ASSN C/O LAURA B WRIGHT
CONDO ASSN MANAGER
110 PERRY AVE
FT WALTON, FL 32548**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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, 2006**

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 PD ☒ Delete
NAME HUTTO, GARY A
STREET ADDRESS 31 PARK CIR., #10
CITY-ST-ZIP FT. WALTON BCH, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME FISHER, BOBBY JR.
STREET ADDRESS C/O 110 PERRY AVE
CITY-ST-ZIP FT WALTON, FL 32548

TITLE ☒ Change ☐ Addition
NAME FISHER, ROBERT W
STREET ADDRESS C/O 110 PERRY AVE
CITY-ST-ZIP FT. WALTON BCH, FL 32548

TITLE D ☒ Delete
NAME MARTIN, TIMOTHY
STREET ADDRESS UNIT # 16 PARK PL CONDO 31 PARK CIR
CITY-ST-ZIP FORT WALTON BEACH, FL 32548

TITLE ☐ Change ☒ Addition
NAME MCGRATH, MICHAEL
STREET ADDRESS 90 110 PERRY AVE
CITY-ST-ZIP FT. WALTON BCH, FL 32548

TITLE D ☒ Delete
NAME HOLDEN, ROGER
STREET ADDRESS 110 PERRY AVE
CITY-ST-ZIP FORT WALTON, FL 32548

TITLE ☐ Change ☒ Addition
NAME FOSTER, MARGARET
STREET ADDRESS C/O 110 PERRY AVE
CITY-ST-ZIP FT. WALTON BCH, FL 32548

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Robert Fisher Pres

4-14-06