2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# N05000001014

Entity Name: DESOTO SQUARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

215 WEST FAIRPOINT DRIVE
GULF BREEZE, FL 32561

New Principal Place of Business:

Current Mailing Address:

215 WEST FAIRPOINT DRIVE
GULF BREEZE, FL 32561

New Mailing Address:

FEI Number: 13-4320100 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HYMAN, CASEY
215 WEST FAIRPOINT DRIVE
GULF BREEZE, FL 32561 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: PSTD ( ) Delete
Name: HYMAN, CASEY
Address: 103 CALLE DE SANTIAGO
City-St-Zip: PENSACOLA, FL 32502

Title: VD ( ) Delete
Name: LOWRY, GARY
Address: 604 NEW WARRINGTON ROAD
City-St-Zip: PENSACOLA, FL 32506

Title: D ( ) Delete
Name: COBB, JENNIFER
Address: C/O 215 WEST FAIRPOINT DRIVE
City-St-Zip: GULF BREEZE, FL 32561

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: HYMAN, CASEY
Address: 215 FAIRPOINT DRIVE
City-St-Zip: GULF BREEZE, FL 32561

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CASEY HYMAN PSTD 04/10/2006

Electronic Signature of Signing Officer or Director — Date