

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007981

FILED  
Apr 06, 2010  
Secretary of State

**Entity Name:** MIRAMAR PALMS OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

321 HARBOR BLVD  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

321 HARBOR BLVD  
DESTIN, FL 32541

**New Mailing Address:**

**FEI Number:** 20-3258440

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURNS, CHERI  
321 HARBOR BLVD  
DESTIN, FL 32541 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:** PD  
**Name:** BURNS, CHERI  
**Address:** 535 OAKLEAF WAY  
**City-St-Zip:** ALPHARETTA, GA 30004 US

**Title:** VPD  
**Name:** STAPLETON, JOHN  
**Address:** 6546 ROSECOMMON DRIVE  
**City-St-Zip:** NORCROSS, GA 30092 US

**Title:** STD  
**Name:** BURNS, WILLIAM  
**Address:** 535 OAKLEAF WAY  
**City-St-Zip:** ALPHARETTA, GA 30004 US

**Title:** MGR  
**Name:** WILLIAMSON, CAROL  
**Address:** 321 HARBOR BOULEVARD  
**City-St-Zip:** DESTIN, FL 32541 US

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:** CAROL WILLIAMSON

MGR

04/06/2010

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

\_\_\_\_\_  
Date