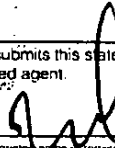
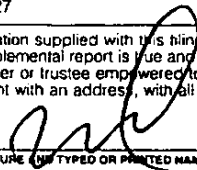


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 09, 2006 8:00 am
Secretary of State

04-24-2006 90415 038 ****61.25

DOCUMENT # N07889					
1. Entity Name DUNES OF PANAMA PHASE V ASSOCIATION, INC.					
Principal Place of Business 7205 THOMAS DRIVE BLDG. C PANAMA CITY BEACH FL 32408 US			Mailing Address 7205 THOMAS DRIVE BLDG. C PANAMA CITY BEACH FL 32408 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2542541	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MYNARD, JEFFREY D. 7205 THOMAS DRIVE BUILDING C PANAMA CITY BEACH FL 32408			7. Name and Address of New Registered Agent 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  DATE 3/6/06 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rendering)					
FILE NOW: 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 NAME STREET ADDRESS CITY-ST-ZIP	P CAASILL, THACILER 1249 ROCK SHOALS RD. MIDLAND GA 31820	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Tim Dorminey 7205 Thomas Drive unit E2002 Panama City Beach, FL 32408	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T STEINBRUNNER, BILL 4022 KNOLL WOOD LANE ANDERSON IN 46011	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PIPPIN, JOHN DR. 3760 RIVER MANSIONS DULUTH GA 30096	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PEARY, MARY 7205 THOMAS DR., E806 PANAMA CITY FL 32408	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REYNOLDS, WILLIS 6217 MILBROOK LANE BRENTWOOD TN 37027	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CALTON, JIMMY 226 E BROAD ST. EUFULA AL 36027	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: 			DATE: 3/6/06 Daytime Phone #: 850-251-8833		
SIGNATURE (NOT TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)					