


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90073 003 ****61.25

DOCUMENT # N34632 1. Entity Name WATERS EDGE OWNERS ASSOCIATION, INC.					
Principal Place of Business 89 BARRACUDA ST DESTIN, FL 32541			Mailing Address 89 BARRACUDA ST DESTIN, FL 32541		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-3012170	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent HALLMAN, RON 91 CRYSTAL BEACH DRIVE DESTIN, FL 32541				7. Name and Address of New Registered Agent Name Jolene Armstrong Street Address (P.O. Box Number is Not Acceptable) 83 Barracuda Street City Destin FL 32541	
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 <u><i>Jolene Armstrong</i></u> DATE <u>2/17/06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		
	PD HALLMAN, ANGIE	91 CRYSTAL BEACH DRIVE	DESTIN, FL 32541	<input checked="" type="checkbox"/> Delete	
	VD FORD, ROBERT	4503 JOHN AVENUE	DESTIN, FL 32541	<input checked="" type="checkbox"/> Delete	
	TD HALLMAN, RON	91 CRYSTAL BEACH DRIVE	DESTIN, FL 32541	<input checked="" type="checkbox"/> Delete	
	SD GOODMAN, TRUDY	77 STING RAY STREET	DESTIN, FL 32541	<input checked="" type="checkbox"/> Delete	
	D STREAKER, PAM	4504 JOHN AVE.	DESTIN, FL 32541	<input checked="" type="checkbox"/> Delete	
	C MALLOY, PAT	4510 LUKE AVENUE	DESTIN, FL 32541	<input checked="" type="checkbox"/> Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		
	President Jolene Armstrong	83 Barracuda Street	Destin, FL 32541	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
	Vice President Bill			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
	Treasurer Jeff Prescott	Barracuda Street	Destin, FL 32541	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
	Secretary Fern Skarupa	Sting Ray	Destin, FL 32541	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
	Director Liz Empson	Barracuda	Destin, FL 32541	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u><i>Jolene Armstrong</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <u>2/17/06</u> Daytime Phone # <u>850/865-0188</u>	