

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37596

FILED
Jan 26, 2007
Secretary of State

Entity Name: SKI WATCH ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1701 E. LARUA STREET
PENSACOLA, FL 32501 US

New Principal Place of Business:

6608 SKI LANE
MILTON, FL 32583 US

Current Mailing Address:

1701 E. LARUA STREET
PENSACOLA, FL 32501 US

New Mailing Address:

6680 SKI LANE
MILTON, FL 32583 US

FEI Number: 59-3143765

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOCKWITH, CHARLES
1701 E. LARUA
PENSACOLA, FL FL US

Name and Address of New Registered Agent:

TRABOLD, MICHAEL
6608 SKI LANE
MILTON, FL 32583 US

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: MICHAEL B. TRABOLD

01/26/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: PICHEL, GEORGE
Address: 6608 SKI LANE
City-St-Zip: MILTON, FL 32583

Title: DP () Delete
Name: BAGGETT, BILL
Address: 6624 SKI LANE
City-St-Zip: MILTON, FL 32583

Title: DT () Delete
Name: BOCKWITH, CHARLES
Address: 6644 SKI LANE
City-St-Zip: MILTON, FL 32583

Title: SEC () Delete
Name: MCCANN, SHAWN
Address: 6661 SHI LANE
City-St-Zip: MILTON, FL 32583

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change () Addition
Name: HARWOOD, FRANK
Address: 6616 SKI LANE
City-St-Zip: MILTON, FL 32583

Title: DT (X) Change () Addition
Name: TRABOLD, MICHAEL
Address: 6608 SKI LANE
City-St-Zip: MILTON, FL 32583

Title: SEC (X) Change () Addition
Name: MCCANN, SHAWN
Address: 6661 SKI LANE
City-St-Zip: MILTON, FL 32583

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: MICHAEL B. TRABOLD

DT

01/26/2007

Electronic Signature of Signing Officer or Director

Date