2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 04, 2004 8:00 am Secretary of State

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DOCUMENT # N45053 1. Entity Name EMERALD SHORES HOMEOWNER'S ASSOCIATION OF SOUTH WALTON, INC.				į.	2004 90040 036 ****61.25
2936 SCENIC GULF DR 2936		Mailing Address . 2936 SCENIC GULF DR DESTIN, FL 32550 U	JS		54003215
2. Principal P	Place of Business	3. Mailing Address			
	a manual annual				ا 1911 - ا المال 1914 و المناطقة المنا
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01222004 Chg-NP	CR2E037 (10/03)
	mar Beach, FL		ach, FL	4. FEI Number 59-3136330	Applied For Not Applicable
Zip	5 50 Country	3D5.50 _	Country	5. Certificate of Status De	sired Sa.75 Additional Fee Required.
Jes	6. Name and Address of Curren	_ · _ · _ · _ · _ · _ · _ · _ ·		7. Name and Address of	New Registered Agent
FIELDS, FREDDIE 25 TOPAZ COVE			Name		
			Street Address	Street Address (P.O. Box Number is Not Acceptable)	
DESTIN, F	FL 32550				
			City		Zip Code
• 					
	 named entity submits this statement tions of registered agent. 	for the purpose of changing its re	egistered office or regis	tered agent, or both, in the Sta	te of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE:	Registered Agent signature requi	ired when reinstating)	DATE
				9.60	mananan ayan ayan ayan ayan ayan ayan ay
	Filing Fee is \$61.25 Due by May 1, 2004	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees	Make check payable to
10.	OFFICERS AND D	DIRECTORS	11.	ADDITIONS/CHANGES TO	DEFICERS AND DIRECTORS IN 10
TITLE	PD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	FIELDS, FREDDIE		NAME		
STREET ADDRESS CITY-ST-ZIP	5289 N FRONTAGE ROAD COLUMBUS, MS 39701		STREET ADDRESS CITY-ST-ZIP		
TITLE	D	Delete		- 12\\ TP	Change ☐ Addition
NAME	DARNOW, BORIS		NAME D	ethow, Box	215
STREET ADDRESS	2021 BRAE TRAIL		STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM, AL 35242		CITY-ST-ZIP		
NAME	LAMBERT, WILLIAM	Delete*	NAME		☐ Change ☐ Addition
STREET ADDRESS	2410 SCENIC DR	•	STREET ADDRESS	\	
CITY-ST-ZIP	GADSDEN, AL 35904		CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE	D D D D D D D D D D D D D D D D D D D	Delete	TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	DARMON, BORIS	,	NAME		
1	1 2021 DDEA TDAIL		CIDITY ADDRESS		
CITY-ST-ZIP	2021 BREA TRAIL BIRMINGHAM, AL 35242		STREET ADDRESS CITY-ST-ZIP		
TITLE	2021 BREA TRAIL BIRMINGHAM, AL 35242 ST	☐ Delete			☐ Change ☐ Addition
TITLE NAME	BIRMINGHAM, AL 35242 ST NICKLEN, GERALD	☐ Delete	CITY-ST-ZIP TITLE NAME		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	BIRMINGHAM, AL 35242 ST NICKLEN GERALD 22 BLACK CORAL COVE	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS	- · · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BIRMINGHAM, AL 35242 ST NICKLEN, GERALD 22 BLACK CORAL COVE DESTIN, FL 32550		CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS	BIRMINGHAM, AL 35242 ST NICKLEN GERALD 22 BLACK CORAL COVE	Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	BIRMINGHAM, AL 35242 ST NICKLEN, GERALD 22 BLACK CORAL COVE DESTIN, FL 32550 D		CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: FRONDIE FLOOR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR JULIE 3/28/04/662-5774-11/9