2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45053

FILED Jun 28, 2005 Secretary of State

Entity Name: EMERALD SHORES HOMEOWNER'S ASSOCIATION OF SOUTH WALTON, INC.

Current Principal Place of Business: New Principal Place of Business:

2936 SCENIC GULF DR

MIRAMAR BEACH, FL 32550 US

Current Mailing Address: New Mailing Address:

2936 SCENIC GULF DR

MIRAMAR BEACH, FL 32550 US

FEI Number: 59-3136330 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FIELDS, FREDDIE LAMBERT, WILLIAM C JR

25 TOPAZ COVE 19 JADE COVE

DESTIN, FL 32550 MIRAMAR BEACH, FL 32550 US 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: WILLIAM C. LAMBERT 06/28/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete FIELDS, FREDDIE LAMBERT, WILLIAM C JR Name: Name:

5289 N FRONTAGE ROAD Address: 2410 SCENIC DRIVE Address: City-St-Zip: COLUMBUS, MS 39701 City-St-Zip: GADSDEN, AL 35904

Title: () Delete Title: (X) Change () Addition DATNOW, BORIS Name: CAPORUSSO, DANIEL Name:

Address: 2021 BRAE TRAIL Address: 1067 TERRACE COURT City-St-Zip: BIRMINGHAM, AL 35242 City-St-Zip: LAKE GENEVA, WI 53147

Title: VPD () Delete Title: S/TD (X) Change () Addition

LAMBERT, WILLIAM NICKLEN, GERALD Name: Name: 2410 SCENIC DR Address: Address: 22 BLACK CORAL COVE City-St-Zip: GADSDEN, AL 35904 City-St-Zip: MIRAMAR BEACH, FL 32550

Title: ST (X) Delete Title: () Change () Addition

Name: NICKLEN, GERALD Name: 22 BLACK CORAL COVE Address: Address: City-St-Zip: DESTIN, FL 32550 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

REPAULT, JIM Name: Name: 1413 JOYNER STREET Address: Address: City-St-Zip: **TUPELO, MS 38804** City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM C. LAMBERT, JR. PD 06/28/2005