


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # N95000001693	
1. Entity Name CERCLE NAUTIQUE OWNER'S ASSOCIATION OF NORTHWEST FLORIDA, INC.	

Principal Place of Business 96 YACHT CLUB DRIVE FT. WALTON BEACH, FL 32548	Mailing Address 96 YACHT CLUB DRIVE FT. WALTON BEACH, FL 32548
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02132008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3309887	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  GRIMSLEY, JAMES W 25 WALTER MARTIN ROAD N.E. FT. WALTON BEACH, FL 32548
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000892149 04/23/08-80054-009 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BEARD, BRYAN 96 YACHT CLUB DR, #8 FT. WALTON BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD LUCKIE, MARGARET 96 YACHT CLUB CRIVE #6 FORT WALTON BEACH, FL 32548
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BURKETT, BETTY C 96 YACHT CLUB DRIVE FT. WALTON BEACH, FL 32548
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SKELLY, JOE 96 YACHT CLUB DR, #9 FT. WALTON BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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: Betty Burkett 4/8/08 858-863-4064

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #