## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9600000730

FILED Apr 14, 2005 Secretary of State

Entity Name: HOLIDAY ISLE TOWERS OWNERS' ASSOCIATION, INC.

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

770 GULF SHORE DRIVE DESTIN, FL 32541

**Current Mailing Address: New Mailing Address:** 

770 GULF SHORE DRIVE DESTIN, FL 32541

FEI Number: 59-3370610 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NEWMAN, RAYMOND F JR 348 MIRACLE STRIP PARKWAY STE 7 FORT WALTON BEACH, FL 32548

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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete CHRISTENSEN, WILLIAM R CHRISTENSEN, WILLIAM R Name: Name: 770 GULF SHORE DRIVE, 803 Address: 770 GULF SHORE DRIVE, #803 Address:

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

Title: ( ) Delete Title: (X) Change ( ) Addition WILLIAMS, GERALD M Name: WILLIAMS, GERALD M Name: Address: 770 GULF SHORE DRIVE, 801 Address: 770 GULF SHORE DRIVE, #801

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

Title: () Delete Title: TD (X) Change ( ) Addition GRAVLEE, DRUE HANKS, KEITH Name: Name:

770 GULF SHORE DRIVE, P-1 770 GULF SHORE DRIVE, #201 Address: Address:

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

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

Name: FRYAR, RUSSELL Name: GRAVLEE, DRUE

770 GULF SHORE DRIVE, 1201 770 GULF SHORE DRIVE, #P-1 Address: Address:

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

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

MORTON, MARGIE Name: Name: 770 GULF SHORE DRIVE #203 Address: Address: City-St-Zip: DESTIN, FL 32541 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: LINDA G. DAVIS AΜ 04/14/2005