

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000730

FILED
Apr 30, 2008
Secretary of State

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

Current Principal Place of Business:

770 GULF SHORE DRIVE
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

770 GULF SHORE DRIVE
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-3370610

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: CHRISTENSEN, WILLIAM R
Address: 770 GULF SHORE DRIVE, #803
City-St-Zip: DESTIN, FL 32541

Title: VD () Delete
Name: WINDHAM, WILLIAM C
Address: 770 GULF SHORE DRIVE, #1003
City-St-Zip: DESTIN, FL 32541

Title: TD () Delete
Name: HANKS, KEITH
Address: 770 GULF SHORE DRIVE, #201
City-St-Zip: DESTIN, FL 32541

Title: SD () Delete
Name: KLYCE, BARBARA
Address: 770 GULF SHORE DRIVE, #1202
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: FRYAR, RUSSELL
Address: 770 GULF SHORE DRIVE #1201
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WINDHAM, WILLIAM C
Address: 84 VICTORIAS DRIVE
City-St-Zip: BOSSIER CITY, LA 71111

Title: VD (X) Change () Addition
Name: WILLIAMS, ROSCOE A
Address: 366 GOLSON ROAD
City-St-Zip: PRATTVILLE, AL 36067

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM C. WINDHAM

DP

04/30/2008

Electronic Signature of Signing Officer or Director

Date