

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002777

FILED
Jan 27, 2005
Secretary of State

Entity Name: EMERALD LAKES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10221 EMERALD COAST PKWY WEST
SUITE 23
MIRAMAR BEACH, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

10221 EMERALD COAST PKWY WEST
SUITE 23
MIRAMAR BEACH, FL 32550 US

New Mailing Address:

FEI Number: 59-3381800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMERALD COAST ASSOCIATION MGT
% JAY GELDER
10221 EMERALD COAST PKWY WEST, S 23
MIRAMAR BEACH, FL 32550 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: STOWERS, BO
Address: 271 TEQUESTA DRIVE
City-St-Zip: DESTIN, FL 32541

Title: VPD () Delete
Name: MARSHALL, DARRELL
Address: 220 WEKIVA COVE
City-St-Zip: DESTIN, FL 32541

Title: SD () Delete
Name: TITUS, HARRY
Address: 287 TEQUESTA DRIVE
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: JOSLIN, ROBERT
Address: 273 TEQUESTA DRIVE
City-St-Zip: DESTIN, FL 32541

Title: DT () Delete
Name: CAMPBELL, WILLIAM
Address: 208 WEKIVA COVE
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PROCTOR, ARNO
Address: 306 TEQUESTA DRIVE
City-St-Zip: DESTIN, FL 32541

Title: VPD (X) Change () Addition
Name: LUNDGREN, ANDREA
Address: 196 WEKIVA COVE
City-St-Zip: DESTIN, FL 32541

Title: SD (X) Change () Addition
Name: RICHEBOURG, RON
Address: 232 TALQUIN COVE
City-St-Zip: DESTIN, FL 32541

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

Title: DT (X) Change () Addition
Name: LEBLANC, ALLAN
Address: 256 OKEECHOBEE COVE
City-St-Zip: DESTIN, FL 32541

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: ARNO PROCTOR

PD

01/27/2005

Electronic Signature of Signing Officer or Director

Date