

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90091 021 ****61.25

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1. Entity Name
**THE MARTINIQUE CONDOMINIUM OWNERS'
ASSOCIATION, INC.**



Principal Place of Business
**12815 HIGHWAY 98 WEST
SUITE 100
MIRAMAR BEACH, FL 32550**

Mailing Address
**P.O. BOX 1779
DESTIN, FL 32540 US**

40014456



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01172007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3398207

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NEWMAN DAILY RESORT PROPERTIES
12815 HWY 98 W
SUITE 100
MIRAMAR BEACH, FL 32550**

7. Name and Address of New Registered Agent

Name
Smith, Loretta W CAM
Street Address (P.O. Box Number is Not Acceptable)
Newman-Dailey Resort Properties
12815 Highway 98 West, Suite 100
City
Miramar Beach FL Zip Code
32550

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

Loretta W Smith, CAM

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-27-07

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
DAVENPORT, GEORGE ☒ Delete
700 GULF SHORE DR. SW
DESTIN, FL 32541

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
MCCLANAHAN, MARTHA ☐ Delete
700 GULF SHORE DRIVE UNIT 3-W
DESTIN, FL 32541

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
TERRY, DAN ☐ Delete
1991 KIRBY WILLS COVE
MEMPHIS, TN 38119

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President ☐ Change ☒ Addition
Brown, George Randy
PO Box 750
Opilika, AL 36801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

John D...

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/28/07

837-1071