

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005843

FILED
Feb 16, 2010
Secretary of State

Entity Name: GRAND CARIBBEAN AT PERDIDO KEY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

13500 SANDY KEY DR
PENSACOLA, FL 32507 US

New Principal Place of Business:

14758 PERDIDO KEY DRIVE
PENSACOLA, FL 32507 US

Current Mailing Address:

14758 PERDIDO KEY DRIVE
PENSACOLA, FL 32507 US

New Mailing Address:

FEI Number: 59-3418826 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CARLETON, SUSAN
14758 PERDIDO KEY DR
PENSACOLA, FL 32507 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
Name: WALDEN, TIM
Address: 4008 FARICHASE LANE
City-St-Zip: BIRMINGHAM, AL 35244

Title: VPD
Name: BROWN, KENNETH
Address: 5127 CHANDELLE DR
City-St-Zip: PENSACOLA, FL 32507

Title: D
Name: BISHOP, LARRY
Address: 115 SHENANDOAH ESTATES CIRCLE
City-St-Zip: BRANDON, MS 39407

Title: D
Name: KUTE, WALTER J
Address: 4618 PORTICO COURT
City-St-Zip: LOUISVILLE, KY 40299

Title: D
Name: HATFIELD, MARTIN
Address: 169 WOODSIDE DR
City-St-Zip: LOUISVILLE, KY 40242

Title: S/TD
Name: WESTON, STUART
Address: 8415 MILLSTREAM DR
City-St-Zip: PENSACOLA, FL 32514

I hereby 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 all other like empowered.

SIGNATURE: TIM WALDEN

PRES

02/16/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date