

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004983

FILED
Feb 13, 2007
Secretary of State

Entity Name: CIBONEY CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2076 SCENIC GULF DR
MIRAMAR BEACH, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2613
FORT WALTON BEACH, FL 32549 US

New Mailing Address:

FEI Number: 59-3568825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RDF ASSOCIATES, INC
29-C MIRACLE STRIP PKWY SW
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: DP () Delete
Name: BROWN, CHARLES
Address: 5000 14TH PLACE E
City-St-Zip: TUSCALOOSA, AL 25404 US

Title: DV () Delete
Name: SHERRILL, JOELLYN
Address: 7407 COLONY PARK DR
City-St-Zip: BIRMINGHAM, AL 35243 US

Title: D () Delete
Name: MONSHAUSEN, ALAN
Address: 5802 NORTH COLLEGE AVE
City-St-Zip: KANSAS CITY, MO 64119 US

Title: DT () Delete
Name: THOMPSON, RICHARD
Address: 2209 PEBBLE BEACH LN
City-St-Zip: BRANDON, SD 57005 US

Title: DS () Delete
Name: THOMPSON, JULIA
Address: 2076 SCENIC GULF DR #4010
City-St-Zip: MIRAMAR BEACH, FL 32550 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change () Addition
Name: SHERRILL, JOELLYN
Address: 24 DIANA HILLS RD
City-St-Zip: ANNISTON, AL 36207 US

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

Title: DT (X) Change () Addition
Name: THOMPSON, RICHARD
Address: 46 BARRINGTON DR
City-St-Zip: PALM COAST, FL 32137 US

Title: DS (X) Change () Addition
Name: THOMPSON, JULIA
Address: 461 SANDY CAY DR.
City-St-Zip: MIRAMAR, FL 32550 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES BROWN

DP

02/13/2007

Electronic Signature of Signing Officer or Director

Date