

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005361

FILED
Apr 29, 2006
Secretary of State

Entity Name: CARIBBEAN DUNES OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

73 SHIRAH ST
DESTIN, FL 32541 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1779
DESTIN, FL 32540 US

New Mailing Address:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

FEI Number: 59-3474124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWMAN DAILEY ROBERT PROPERTIES
LORETTA W. SMITH
12815 HWY 98 W STE 100
MIRAMAR BEACH, FL 32550 US

Name and Address of New Registered Agent:

GORMLEY, TERRY P
215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

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: TERRY P GORMLEY

04/29/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PERFETTO, BARBARA
Address: 713 E FOX DEN DR
City-St-Zip: KNOXVILLE, TN 37922

Title: P () Delete
Name: JOHNSON, BOB
Address: 2748 WERK RIDGE DRIVE
City-St-Zip: CINCINNATI, OH 45248

Title: T () Delete
Name: HAMILTON, TODD
Address: 29 SCHOOL ST
City-St-Zip: HOLLISTON, MA 01746

Title: VP () Delete
Name: FLETCHER, MARTHA
Address: 218 E. FRANKLIN ST
City-St-Zip: QUINCY, FL 35351

Title: S (X) Delete
Name: ROGILLIO, MAGIE
Address: PO BOX 129
City-St-Zip: GREENWELL SPRINGS, LA 70739

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: BOND, CHERIE
Address: 10 LAKESIDE PL
City-St-Zip: BRANDON, MS 39047 US

Title: DP (X) Change () Addition
Name: JOHNSON, ROBERT
Address: 2748 WENKRIDGE DR
City-St-Zip: CINCINNATI, OH 45248 US

Title: DT (X) Change () Addition
Name: HAMILTON, TODD
Address: 29 SCHOOL ST
City-St-Zip: HOLLISTON, MA 01746 US

Title: DV (X) Change () Addition
Name: FLETCHER, MARTHA
Address: 218 E. FRANKLIN ST
City-St-Zip: QUINCY, FL 35351 US

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

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: CHERIE BOND

DS

04/29/2006

Electronic Signature of Signing Officer or Director

Date