# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 23, 2008**
**Secretary of State**

DOCUMENT# N97000005361

**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:**

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

**New Mailing Address:**

**FEI Number: 59-3474124** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GORMLEY, TERRY P
215 GRAND BLVD
SUITE 200
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: DS ( ) Delete
Name: BOND, CHERIE
Address: 10 LAKESIDE PL
City-St-Zip: BRANDON, MS 39047 US

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

Title: DT ( ) Delete
Name: HARP, BERT
Address: 5080 GREYSTONE WAY
City-St-Zip: BIRMINGHAM, AL 35242 US

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

Title: D ( ) Delete
Name: TURNER, BRENDA
Address: 2056 NISKY LAKE RD SW
City-St-Zip: ATLANTA, GA 30331 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: DT (X) Change ( ) Addition
Name: HARP, BRET
Address: 5080 GREYSTONE WAY
City-St-Zip: BIRMINGHAM, AL 35242 US

Title: DV (X) Change ( ) Addition
Name: RENCHER, DAN
Address: 4813 RAVEN CT
City-St-Zip: MOBILE, AL 36608 US

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

I hereby certify that the information supplied with this filing does not qualify 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 S 04/23/2008
Electronic Signature of Signing Officer or Director — Date