## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000005361

FILED Apr 22, 2011 Secretary of State

Entity Name: CARIBBEAN DUNES OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

215 GRAND BLVD 215 GRAND BLVD

SUITE 200 STE 200

MIRAMAR BEACH, FL 32550 US MIRAMAR BEACH, FL 32550 US

Current Mailing Address: New Mailing Address:

215 GRAND BLVD 215 GRAND BLVD

SUITE 200 STE 200

MIRAMAR BEACH, FL 32550 US 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: Name and Address of New Registered Agent:

GORMLEY, TERRY P HAWLEY, SHEILA 215 GRAND BLVD 215 GRAND BLVD

SUITE 200 STE 200

MIRAMAR BEACH, FL 32550 US 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: SHEILA HAWLEY 04/22/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: DP

Name: CORDER, ERIC

Address: 215 GRAND BLVD STE 200 City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: DV

 Name:
 JOHNSON, ROBERT

 Address:
 215 GRAND BLVD STE 200

 City-St-Zip:
 MIRAMAR BEACH, FL 32550 US

Title: DST

 Name:
 FLETCHER, MARTHA

 Address:
 215 GRAND BLVD STE 200

 City-St-Zip:
 MIRAMAR BEACH, FL 32550 US

Title: D

Name: BENNETT, RITA

Address: 215 GRAND BLVD STE 200 City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title:

 Name:
 HARDISON, BARRY

 Address:
 215 GRAND BLVD STE 200

 City-St-Zip:
 MIRAMAR BEACH, FL 32550 US

Title:

 Name:
 WIGGLESWORTH, CLAUDIA

 Address:
 215 GRAND BLVD STE 200

 City-St-Zip:
 MIRAMAR BEACH, FL 32550 US

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: MARTHA FLETCHER S 04/22/2011