

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001524

FILED
Jan 20, 2006
Secretary of State

Entity Name: WALTON COUNTY SNOWBIRDS, INC.

Current Principal Place of Business:

150 GULF SHORE DR.
UNIT # 103
DESTIN, FL 325413049 US

New Principal Place of Business:

Current Mailing Address:

150 GULF SHORE DR.
UNIT # 103
DESTIN, FL 325413049 US

New Mailing Address:

FEI Number: 59-3501182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMS, FORD
150 GULF SHORE DR.
UNIT # 103
DESTIN, FL 325413049 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: PRES () Delete
Name: BARNARD, MARILYN W
Address: 100 SEASCAPE DR UNIT 64B
City-St-Zip: MIRAMAR BEACH, FL 325503914 US

Title: VP () Delete
Name: TILT, DON
Address: 2440 SCENIC GULF DR.
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: VP () Delete
Name: CHRISTOPHER, DAVE
Address: 100 SEASCPE DR. UNIT 66A
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: TRES () Delete
Name: CARDWELL, BETTY
Address: 285 PAYNE ST UNIT 26A
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: SEC () Delete
Name: BRUDER, DONNA
Address: 2410 SCENIC GULF DR. UNIT 202B
City-St-Zip: MIRAMAR BEACH, FL 33550 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BARNARD, MARILYN W
Address: 100 SEASCAPE DR., UNIT 64B
City-St-Zip: MIRAMAR BEACH, FL 325503914 US

Title: VP (X) Change () Addition
Name: TILT, DON
Address: 2440 SCENIC GULF DR., UNIT 204
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: VP (X) Change () Addition
Name: CHRISTOPHER, DAVE
Address: 100 SEASCPE DR., UNIT 66A
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: TRES (X) Change () Addition
Name: CARDWELL, BETTY
Address: 285 PAYNE ST, UNIT 23A
City-St-Zip: MIRAMAR BEACH, FL 32550 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: MARILYN W. BARNARD

PRES

01/20/2006

Electronic Signature of Signing Officer or Director

Date