

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05445

FILED
Jan 28, 2014
Secretary of State
CC6580553476

Entity Name: TWO HUNDRED WEST CONDOMINIUM OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

200 MIRACLE STRIP PKWY.
FT. WALTON BCH., FL 32548

Current Mailing Address:

PO BOX 4641
FORT WALTON BEACH, FL 32549 US

FEI Number: 59-2521351

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAWSON, STUART
200 MIRACLE STEP PARKWAY, APT. 701
FT. WALTON BCH, FL 32548 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name CORBIN, LINDA
Address 200 W. MIRACLE STRIP WAY
City-State-Zip: FORT WALTON BEACH FL 32548

Title MD
Name MANLEY, RICHARD
Address 200 WEST MIRACLE STRIP PKWY
City-State-Zip: FORT WALTON BEACH FL 32548

Title PD
Name DAWSON, STUART
Address 200 WEST MIRACLE STRIP PKWY
City-State-Zip: FORT WALTON BEACH FL 32548

Title ST
Name WILLIAMSON, KENNETH
Address 200 MIRACLE STRIP PKWY.
City-State-Zip: FORT WALTON BEACH FL 32548

Title MGR
Name FOWNER, DEBBIE
Address 29C MIRACLE STRIP PKWY SW
City-State-Zip: FORT WALTON BEACH FL 32548

Title D
Name PLASTER, MIKE
Address 200 W MIRACLE STRIP PAKRWAY
UNIT 501
City-State-Zip: FORT WALTON BEACH FL 32548

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: DEBBIE FOWNER

MGR

01/28/2014

Electronic Signature of Signing Officer/Director Detail

Date