2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724367

FILED Jan 25, 2009 Secretary of State

Entity Name: LAGOON VILLAS ASSOCIATION, INC.

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

% AMELIA ISLAND MANAGEMENT INC. 3000 FIRST COAST HWY AMELIA ISLAND, FL 32034

Current Mailing Address: New Mailing Address:

% AMELIA ISLAND MANAGEMENT INC. 3000 FIRST COAST HWY AMELIA ISLAND, FL 32034

FEI Number: 59-1567340 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:

HEALAN, JACK JR.

MUIR, ROBERT C III
3000 FIRST COAST HWY

3000 FIRST COAST HWY

AMELIA ISLAND, FL 32034 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: ROBERT C. MUIR, III 01/25/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D () Delete
 Title:
 STD (X) Change () Addition

 Name:
 SYMTHE, EDWARD
 Name:
 SYMTHE, EDWARD B

 Address:
 6705 CRYSTAL LAKE DR
 Address:
 6705 CRYSTAL LAKE DR

 City-St-Zip:
 KNOXVILLE, TN 37919
 City-St-Zip:
 KNOXVILLE, TN 37919

Title: D () Delete Title: VD (X) Change () Addition Name: KAUER, DONALD Name: KAUER, DONALD Address: 31 GREAT OAK DRIVE 31 GREAT OAK DRIVE

City-St-Zip: HUDSON, OH 44236 City-St-Zip: HUDSON, OH 44236

 Title:
 PD () Delete
 Title:
 () Change () Addition

 Name:
 HALL, DENNIS
 Name:

 Address:
 1213 BEACHWALKER ROAD
 Address:

City-St-Zip: AMELIA ISLAND, FL 32034 City-St-Zip:

Title: () Delete Title: D () Change (X) Addition

Name:Name:SPALDING, ARTHURAddress:Address:3238 TURTLE LAKE DRIVECity-St-Zip:City-St-Zip:MARIETTA, GA 30067

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: DENNIS HALL P 01/25/2009