

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732489

FILED  
May 20, 2008  
Secretary of State

Entity Name: WES VIC HOLIDAY SANDS PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1812 SUNNY OAK ST  
GULF BREEZE, FL 32563

**New Principal Place of Business:**

**Current Mailing Address:**

1812 SUNNY OAK ST  
GULF BREEZE, FL 32563

**New Mailing Address:**

FEI Number: 59-2451418      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ROGERS, JOHN W  
1625 SUNCREST ST  
GULF BREEZE, FL 32563      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: P ( ) Delete  
Name: ROGERS, JOHN  
Address: 1625 SUNCREST  
City-St-Zip: GULF BREEZE, FL 32563

Title: BD ( ) Delete  
Name: WADE, MITCH  
Address: 6498 SEASIDE COVE  
City-St-Zip: GULF BREEZE, FL 32563

Title: BD ( ) Delete  
Name: SCALFANI, VINCE  
Address: 4833 KITTY HAWK  
City-St-Zip: GULF BREEZE, FL 32563

Title: TS ( ) Delete  
Name: ROGERS, MICHELLE  
Address: 1625 SUNCREST ST.  
City-St-Zip: GULF BREEZE, FL 32563

Title: BD ( ) Delete  
Name: SCHULER, MILES  
Address: 6243 GULF BREEZE PKWY  
City-St-Zip: GULF BREEZE, FL 32563 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: VP (X) Change ( ) Addition  
Name: ROGERS, JOHN  
Address: 1625 SUNCREST  
City-St-Zip: GULF BREEZE, FL 32563

Title: P (X) Change ( ) Addition  
Name: WEBER, JOE  
Address: 1710 SUNNY OAK  
City-St-Zip: GULF BREEZE, FL 32563

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

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

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

Title: BD ( ) Change (X) Addition  
Name: CREAGER, ORVILLE  
Address: 4003 S. CHURCH STREET  
City-St-Zip: MEIGS, GA 31765

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: JOHN WAYNE ROGERS

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

VP

05/20/2008

\_\_\_\_\_ Date