

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 29, 2009  
Secretary of State**

DOCUMENT# 740246

Entity Name: DUNES OF PANAMA PHASE I ASSOCIATION, INC.

**Current Principal Place of Business:**

7205 THOMAS DRIVE  
BLDG A  
PANAMA CITY, FL 32408

**New Principal Place of Business:**

**Current Mailing Address:**

7205 THOMAS DRIVE  
BLDG A  
PANAMA CITY, FL 32408

**New Mailing Address:**

FEI Number: 59-1838117      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ARNOLD, JOHN R MGR  
7205 THOMAS DRIVE  
BLDG A  
PANAMA CITY, FL 32408 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: T            ( ) Delete  
Name: SCHAFFER, JOYCE  
Address: 136 ALEXANDRIA DR  
City-St-Zip: MACON, GA 32417

Title: D            ( ) Delete  
Name: BEAM, JANICE  
Address: 5111 BOYD DRIVE  
City-St-Zip: COLUMBUS, GA 31909

Title: S            ( ) Delete  
Name: BOWLES, JANE  
Address: RR3 BOX 291  
City-St-Zip: CUTHBERT, GA 39840

Title: D            ( ) Delete  
Name: DUFFEY, HENRY  
Address: 2551 AMALFI DR  
City-St-Zip: CONYERS, GA 30012

Title: D            ( ) Delete  
Name: MITCHAM, JAMES  
Address: P.O. BOX 20397  
City-St-Zip: PANAMA CITY, BCH, FL 32417

Title: P            ( ) Delete  
Name: HAWKINS, DAVID  
Address: 1753 ARGONNE DRIVE  
City-St-Zip: MORROW, GA 30281

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

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: P            (X) Change ( ) Addition  
Name: DUFFY, HENRY  
Address: 2551 AMALFI DR  
City-St-Zip: CONYERS, GA 30012

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

Title: D            (X) Change ( ) Addition  
Name: HAWKINS, DAVID  
Address: 1753 ARGONNE DRIVE  
City-St-Zip: MORROW, GA 30281

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: DAVID HAWKINS

D

04/29/2009

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

\_\_\_\_\_  
Date