2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#764740

FILED Jan 05, 2012 Secretary of State

Entity Name: WHITE CLIFFS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

2393 W. CO. HWY 30A

SANTA ROSA BEACH, FL 32459 US

Current Mailing Address: New Mailing Address:

P. O. BOX 4785 POST OFFICE BOX 4785

SANTA ROSA BEACH, FL 32459 US SANTA ROSA BEACH, FL 32459 US

FEI Number: 59-2493721 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:

SMITH, CHARLEEN E
174 WATERCOLOR WAY
402

SMITH, CHARLEEN E
174 WATERCOLOR WAY
SUITE 103 BOX 402

SANTA ROSA BEACH, FL 32459 US SANTA ROSA BEACH, FL 32459 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: CHARLEEN SMITH 01/05/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: WILLIAMSON, JAMES T Address: 3512 KINGS HILL ROAD City-St-Zip: BIRMINGHAM, AL 35223

Title: DV

Name: NOOTERMAN, JOHN Address: 2393 CO HWY 30A

City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DP

Name: TORREY, RANDY Address: P. O. BOX 1621

City-St-Zip: SANTA ROAS BEACH, FL 32459

Title: DST

 Name:
 HOWARD, WYN

 Address:
 P. O. BOX 55748

 City-St-Zip:
 METAIRIE, LA 70055

Title:

Name: HOHL, LESTER
Address: 943 NORRINGTON WAY
City-St-Zip: FENTON, MO 63026

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: CHARLEEN SMITH MANG 01/05/2012