2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#767034

FILED Mar 08, 2010 Secretary of State

Entity Name: SUNSWEPT COMMUNITY ASSOCIATION, INC.

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

6829 THOMAS DRIVE

PANAMA CITY, FL 32408 US

Current Mailing Address: New Mailing Address:

6829 THOMAS DRIVE P.O. BOX 9297

PANAMA CITY, FL 32408 US PANAMA CITY BEACH, FL 32417 US

FEI Number: 59-2477377 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:

ALLEN, DIANNE ELGEE, CHRIS 7902 THOMAS DRIVE 6829 THOMAS DR.

PANAMA CITY BEACH, FL 32408 US PANAMA CITY BEACH, FL 32408 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: CHRIS ELGEE 03/08/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

 Name:
 MALCOM, AL

 Address:
 P.O. BOX 80636

 City-St-Zip:
 CONYERS, GA 30013

Title: T

Name: WITHERS, SHIRLEY

Address: 1816 SW LONGVIEW TERRACE City-St-Zip: LEE'S SUMMIT, MO 64081

Title: D

Name: RADNEY, JOHN
Address: 1401 SHEBA COURT
City-St-Zip: COLUMBUS, GA 31904

Title: S

Name: WRIGHT, FRANCES
Address: 5466 ARMOUR RD
City-St-Zip: COLUMBUS, GA 31909

Title: [

 Name:
 HANLON, GARY

 Address:
 4075 TRALEE DRIVE

 City-St-Zip:
 LAKE WHALES, FL 33859

Title:

 Name:
 NEEL, NORA

 Address:
 5204 HURST DRIVE

 City-St-Zip:
 COLUMBUS, GA 31909

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: AL MALCOM P 03/08/2010