## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000009612

FILED Apr 03, 2008 Secretary of State

Entity Name: BAYOU LANDINGS HOMEOWNERS ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 10221 EMERALD COAST PARKWAY WESTQ SUITE 23 MIRAMAR BEACH, FL 32550 **New Mailing Address: Current Mailing Address:** 10221 EMERALD COAST PARKWAY WEST SUITE 23 MIRAMAR BEACH, FL 32550 FEI Number: 51-0483313 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: GELDER, JAY B 10221 EMERALD COAST PARKWAY WEST SUITE 23 MIRAMAR BEACH, FL 32550 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WILDE, KEN Name: Name: 155 BAYOU LANDING ROAD Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: Title: STD Title: VPD (X) Change ( ) Addition ( ) Delete Name: MARTIN, KATHY Name: MARTIN, KATHY Address: 132 BAYOU LANDING RD. Address: 132 BAYOU LANDING RD. City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459 Title: VPD () Delete Title: STD (X) Change ( ) Addition REED, ELS HERRICK, JANEL Name: Name: 20 BAYOU LANDING ROAD 132 BAYOU LANDING ROAD Address: Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

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: KEN WILDE PD 04/03/2008