

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 23, 2008  
Secretary of State

DOCUMENT# N04000000810

Entity Name: VILLA COYABA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550 US

**New Mailing Address:**

FEI Number: 20-1459051      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GORMLEY, TERRY P  
215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550 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: DST ( ) Delete  
Name: MCCARTHY, PATRICK  
Address: 3016 SCENIC HWY 98 #108  
City-St-Zip: DESTIN, FL 32541 US

Title: DP ( ) Delete  
Name: SPRENKLE, JASON  
Address: 437 CAPTAINS CIR  
City-St-Zip: DESTIN, FL 32541 US

Title: DV ( ) Delete  
Name: CLEVELAND, CLIFF  
Address: PO BOX 1944  
City-St-Zip: MONTGOMERY, AL 36102 US

Title: D ( ) Delete  
Name: OVERTON, DON  
Address: 10180 GROOMESBRIDGE RD  
City-St-Zip: ALPHARETTA, GA 30022 US

Title: D (X) Delete  
Name: BRENNER, LUANN  
Address: 30577 ATLANTA LN  
City-St-Zip: WESTLAKE, OH 44145 US

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

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

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

Title: D (X) Change ( ) Addition  
Name: SNEED, DONNA  
Address: 4701 SEASTAR VISTA  
City-St-Zip: DESTIN, FL 32541 US

Title: D (X) Change ( ) Addition  
Name: MORRISSETTE, NATALIE  
Address: 189 W CANEBRAKE  
City-St-Zip: HATTIESBURG, MS 39402 US

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

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: PATRICK MCCARTHY

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04/23/2008

Electronic Signature of Signing Officer or Director

Date