2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008409

FILED Mar 04, 2008 Secretary of State

Entity Name: MAGNOLIA DUNES OWNERS' ASSOCIATION, INC.

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

176 COMMERCIAL PARKWAY 24 SUGAR SAND LANE

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

Current Mailing Address: New Mailing Address:

P.O. BOX 1414 748 RIHELY

CRESTVIEW, FL 32536 ENCINITAS, CA 92024

FEI Number: 20-1693171 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:

MCCANN, RONALD

1328 N. FERDON BLVD.

24 SUGAR SAND LANE
STE 231

STE. 321 SANTA ROSA BEACH, FL 32459 US CRESTVIEW, FL 32536 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: DAN R DETTMANN 03/04/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name:SANDERS, DAVID JName:DETTMANN, DAN RAddress:#20 MAY DRIVEAddress:24 SUGAR SAND LANE

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

Title: VD (X) Delete Title: () Change () Addition

 Name:
 MARLOW, MARK L
 Name:

 Address:
 176 COMMERCIAL PARKWAY
 Address:

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

Title: STD (X) Delete Title: () Change () Addition

 Name:
 SANDERS, YOUNG C
 Name:

 Address:
 #20 MAY DRIVE
 Address:

 City-St-Zip:
 SANTA ROSA BEACH, FL 32459
 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: DAN R DETTMANN PD 03/04/2008