## 2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # N05000002998**

1002 W. 23RD STREET

PANAMA CITY, FL 32405

**BOARDWALK BEACH RESORT COMMUNITY** ASSOCIATION, INC.



Mailing Address

1002 W. 23RD STREET PANAMA CITY, FL 32405



## Apr 24, 2008 8:00 am Secretary of State

04-24-2008 90118 040 \*\*\*\*61.25

40080000



01142008 No Chg-NP

CR2E037 (4/06)

4. FEI Number			Applied For
20-2773369			Not Applicable
5 Certificate of Status Desire	д П	\$8.75	Additional

6. Name and Address of Current Registered Agent

LININGSTON, ED 1002 W 23RD ST

SIGNATURE:

DO	NOT	WRITE
IN '	THIS	SPACE

SUITE 400 PANAMA	The state of the s			IN '	THIS SPACE
	named entity submits this statement for the lons of registered agent.	purpose of changing its registered	office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	e if applicable. (NOTE: Registered A	gent signature	required, when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financia     Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE SD MCKINNON, ANNE 9400 S THOMAS DR PANAMA CITY BEACH, FL 32407	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD LIVINGSTON, ED 1002 W 23RD ST., SUITE 400 PANAMA CITY, FL 32405				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POWELL, RAYMOND 1022 W 23RD ST PANAMA CITY, FL 32405		<b></b>	DO	NOT WRITE
TITLE" NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					