

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05835

FILED  
Mar 02, 2010  
Secretary of State

**Entity Name:** POINT LAGOON COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

8501 N. LAGOON DR. #100  
PANAMA CITY BCH., FL 32408

**New Principal Place of Business:**

**Current Mailing Address:**

8501 N. LAGOON DR. #100  
PANAMA CITY BCH., FL 32408

**New Mailing Address:**

FEI Number: 59-3026296

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

IMPACT TAX & ACCOUNTING INC  
8730 THOMAS DRIVE #1110B  
PANAMA CITY BEACH, FL 32407 US

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

IMPACT TAX & ACCOUNTING INC  
8406 PANAMA CITY BEACH PARKWAY  
STE G  
PANAMA CITY BEACH, FL 32407 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: CHRISTINA PETTYS

03/02/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MCCARTHY, LOIS  
Address: 8501 N. LAGOON DR. #309  
City-St-Zip: PANAMA CITY BCH., FL 32408

Title: TD  
Name: FAULKNER, LARRY  
Address: 8501 N. LAGOON DR. #408  
City-St-Zip: PANAMA CITY BCH., FL 32408

Title: SD  
Name: FINA, JUDITH  
Address: 8501 N. LAGOON DR. #406  
City-St-Zip: PANAMA CITY BCH., FL 32408

Title: VPD  
Name: PRESLASKI, LUKE  
Address: 8501 NORTH LAGOON DR #409  
City-St-Zip: PANAMA CITY BCH., FL 32408

Title: D  
Name: KAUFMAN, DEBI  
Address: 8501 N. LAGOON DR. #106  
City-St-Zip: PANAMA CITY BCH., FL 32408

Title: D  
Name: CHOATE, DON  
Address: 3104 GARDEN LAKES BLVD  
City-St-Zip: ROME, GA 30165

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: LOIS MCCARTHY

P

03/02/2010

Electronic Signature of Signing Officer or Director

Date