


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

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # N10523 1. Entity Name HOLIDAY BEACH ON THE GULF PROPERTY OWNERS ASSOCIATION, INC.	
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Principal Place of Business 4121 NANCEE DR PANAMA CITY BEACH, FL 32408 US	Mailing Address 4121 NANCEE DR PANAMA CITY BEACH, FL 32408 US
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DO NOT WRITE IN THIS SPACE



01052008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3151517	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAROLLA, TED
4121 NANCEE DR
PANAMA CITY BEACH, FL 32408

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NANCE, NANCY 4108 NANCEE DR PANAMA CITY, FL 32408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEAVY, JACK 4129 DANNY DR PANAMA CITY, FL 32408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HUGHES, CLIFFORD 911 ITCHIA GIN RD. CARROLLTON, GA 30116
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PINNER, TOM 4123 DANNY DR PANAMA CITY, FL 32408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MOSELEY, JUDY 331 MOSELEY LANE ASHFORD, AL 36312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAROLLA, TED 4121 NANCEE DR PANAMA CITY, FL 32408

U00000780005
01/14/08-80004-026 70.00

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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.

SIGNATURE: Ted Marolla 1-7-08 850-234-2602
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #