

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005256

FILED
Apr 22, 2009
Secretary of State

Entity Name: SEACREST BEACH OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 611645
ROSEMARY BEACH, FL 32461 US

New Principal Place of Business:

66 GEOFF WILDER LANE
PANAMA CITY BEACH, FL 32413 US

Current Mailing Address:

P.O. BOX 611645
ROSEMARY BEACH, FL 32461 US

New Mailing Address:

FEI Number: 59-3515540 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TARVER, LOYD
180 CULLMAN AVE
SANTA ROSA BEACH, FL 32459 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: DS () Delete
Name: GUNRINO-SANDERS, BRAD
Address: 10771 ISOLA BELLA CT.
City-St-Zip: MIROMAR LAKES, FL 33913

Title: DP () Delete
Name: MEYER, DON
Address: 4331 GADSDEN CT
City-St-Zip: JACKSONVILLE, FL 32207

Title: DV () Delete
Name: BALLAR, KATHERINE
Address: 5893 REVINGTON DR
City-St-Zip: NORCROSS, GA 30092

Title: DV () Delete
Name: MURPHREE, JAMES
Address: 389 JAMES STREET
City-St-Zip: OZARK, AL 36360

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: MEYER, BETTY LOU
Address: 4331 GADSDEN COURT
City-St-Zip: JACKSONVILLE, FL 32207

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

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

Title: D (X) Change () Addition
Name: MURPHREE, JAMES
Address: 389 JAMES STREET
City-St-Zip: OZARK, AL 36360

Title: DT () Change (X) Addition
Name: MARSH, DIANE
Address: 950 TULLIS ROAD
City-St-Zip: LAWRENCEVILLE, GA 30043

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: LOYD TARVER

DP

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date