

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005256

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** SEACREST BEACH OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

66 GEOFF WILDER LANE  
PANAMA CITY BEACH, FL 32413 US

**New Principal Place of Business:**

**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  
Name: MEYER, BETTY LOU  
Address: 4331 GADSDEN COURT  
City-St-Zip: JACKSONVILLE, FL 32207

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

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

Title: D  
Name: MURPHREE, JAMES  
Address: 389 JAMES STREET  
City-St-Zip: OZARK, AL 36360

Title: DT  
Name: MARSH, DIANE  
Address: 950 TULLIS ROAD  
City-St-Zip: LAWRENCEVILLE, GA 30043

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: DON MEYER

P

03/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date