

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007051

FILED
Apr 24, 2009
Secretary of State

Entity Name: EMERALD BAY WEST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12273 U.S. HWY 98
204A
DESTIN, FL 32550

New Principal Place of Business:

1273 EMERALD BAY DRIVE
DESTIN, FL 32541

Current Mailing Address:

P.O. BOX 1895
DESTIN, FL 32541

New Mailing Address:

P.O. BOX 6521
MIRAMAR BEACH, FL 32550

FEI Number: 59-3498005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEACOAST ASSOCIATION MANAGEMENT
C/O WALT LEIRER
12273 U.S. HWY 98 SUITE 204 A
DESTIN, FL 32550 US

Name and Address of New Registered Agent:

SOLTIS, DENNIS G
1273 EMERALD BAY DRIVE
DESTIN, FL 32541 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: DENNIS SOLTIS

04/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: CHRISTIE, GERALD
Address: 1348 EMERALD BAY DR.
City-St-Zip: DESTIN, FL 32541

Title: MGR () Delete
Name: LEIRER, WALT
Address: PO BOX 1895
City-St-Zip: DESTIN, FL 32541

Title: V () Delete
Name: DEAMES, BILLY
Address: 1459 EMERALD BAY DR
City-St-Zip: DESTIN, FL 32541

Title: S (X) Delete
Name: SOLTIS, ANDREA
Address: 1273 EMERALD BAY DR
City-St-Zip: DESTIN, FL 32541

Title: T (X) Delete
Name: YEABOWER, LYNDA
Address: 1242 EMERALD BAY DR
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOLTIS, DENNIS
Address: 1273 EMERALD BAY DRIVE
City-St-Zip: DESTIN, FL 32541

Title: V (X) Change () Addition
Name: FRANCO, VINCENT
Address: 1359 EMERALD BAY DRIVE
City-St-Zip: DESTIN, FL 32541

Title: T (X) Change () Addition
Name: ALLEN, LES
Address: 4919 COLD HARBOR DRIVE
City-St-Zip: BIRMINGHAM, AL 35223

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

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

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: DENNIS SOLTIS

PRES

04/24/2009

Electronic Signature of Signing Officer or Director

Date