

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002683

FILED
Apr 29, 2006
Secretary of State

Entity Name: THE VILLAS AT SANTA ROSA BEACH OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7 TOWN CENTER LOOP
C-16
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1247
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 59-3521038 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STENBERG, CYNTHIA T
56 SPIRES LANE #17A
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: D () Delete
Name: SIM, BALKCOIN
Address: # 50 THE PARKS DC, 78 LINDBERG DR
City-St-Zip: ATLANTA, GA 30305

Title: D () Delete
Name: ROSS, GEVENA
Address: 77 CJATEAI ;A TPIR
City-St-Zip: KENNER, LA 70065

Title: STD () Delete
Name: COX, CHAN
Address: P.O BOX 660847
City-St-Zip: BIRMINGHAM, AL 35266

Title: PD () Delete
Name: MITCHELL, ROYCE
Address: 247 MULBERRY
City-St-Zip: MANDEVILLE, LA 70471

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: JIM, BALKCOIN
Address: # 50 THE PARKS DC, 78 LINDBERG DR
City-St-Zip: ATLANTA, GA 30305

Title: SD (X) Change () Addition
Name: ROSS, GEVENA
Address: 77 CHATEAU LATOUR
City-St-Zip: KENNER, LA 70065

Title: PD (X) Change () Addition
Name: COX, CHAN
Address: P.O BOX 660847
City-St-Zip: BIRMINGHAM, AL 35266

Title: D (X) Change () Addition
Name: MITCHELL, ROYCE
Address: 247 MULBERRY
City-St-Zip: MANDEVILLE, LA 70471

Title: VPD () Change (X) Addition
Name: CRICHTON, SCOTT
Address: 501 TEXAS AVE SUITE 300D
City-St-Zip: SHREVEPORT, LA 71101

I hereby certify that the information supplied with this filing does not qualify for the 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: CHAN COX

Electronic Signature of Signing Officer or Director

PRES

04/29/2006

_____ Date