## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N06000004213

FILED Oct 16, 2008 Secretary of State

Entity Name: SHORES OF PANAMA RESORT COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9900 S. THOMAS DR. 9900 S. THOMAS DRIVE

PANAMA CITY, FL 32408 PANAMA CITY BEACH, FL 32408

Current Mailing Address: New Mailing Address:

9900 S. THOMAS DR. 5908 THOMAS DRIVE

PANAMA CITY, FL 32408 PANAMA CITY BEACH, FL 32408

FEI Number: 20-8304830 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WALTERS, ELIZABETH J OASEAS LLC

415 BECKRICH ROAD SUITE 500 5908 THOMAS DRIVE

PANAMA CITY BEACH, FL 32407 US PANAMA CITY BEACH, FL 32408 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: MIKE GRIFFIN 10/16/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DO ( ) Delete Title: VP (X) Change ( ) Addition

Name: BRELAND, CHARLES K JR Name: BRELAND, CHARLES K JR

Address: PO BOX 7430 Address: PO BOX 7430

City-St-Zip: SPANISH FORT, AL 36577 City-St-Zip: SPANISH FORT, AL 36577

Title: DO ( ) Delete Title: SCTR (X) Change ( ) Addition

Name: TRICE, LARRY F Name: TRICE, LARRY F

 Address:
 PO BOX 7430
 Address:
 PO BOX 7430

 City-St-Zip:
 SPANISH FORT, AL 36577
 City-St-Zip:
 SPANISH FORT, AL 36577

Title: DO ( ) Delete Title: PRES (X) Change ( ) Addition

 Name:
 HUDGENS, DAVID E
 Name:
 CROSBY, GREG A

 Address:
 PO BOX 7430
 Address:
 225 STEEPLECHASE RUN

 City-St-Zip:
 SPANISH FORT, AL 36577
 City-St-Zip:
 WARNER ROBBINS, GA 31088

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: GREG A CROSBY PRES 10/16/2008